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ABSTRACT

This curriculum guide, part of a multi-volume dietetic support personnel training program, consists of materials for use in training future food service supervisors. The first unit provides an overview of the field of dietetics. Addressed next are various aspects of nutrition and diet therapy as well as the functions and sources of nutrients, digestion and absorption, nutritional adequacy, dietary modifications, combination diets, communication skills, and documentation. The next series of units examines sanitation in patient areas as well as supervision of sanitation and kitchen safety. Discussed in a section on food production are planning menus, purchasing, supervising receiving and storage, managing equipment, supervising food production and service, and assuring productivity. Concluding the guide are units on such aspects of supervision as human relations skills, leadership, personnel management, regulations, policies and procedures, and cost control. Each instructional unit contains some or all of the following: performance objectives, suggested activities, information sheets, transparency masters, class and clinical assignment sheets, job sheets, tests, and answers to the test and assignment sheets. (MN)

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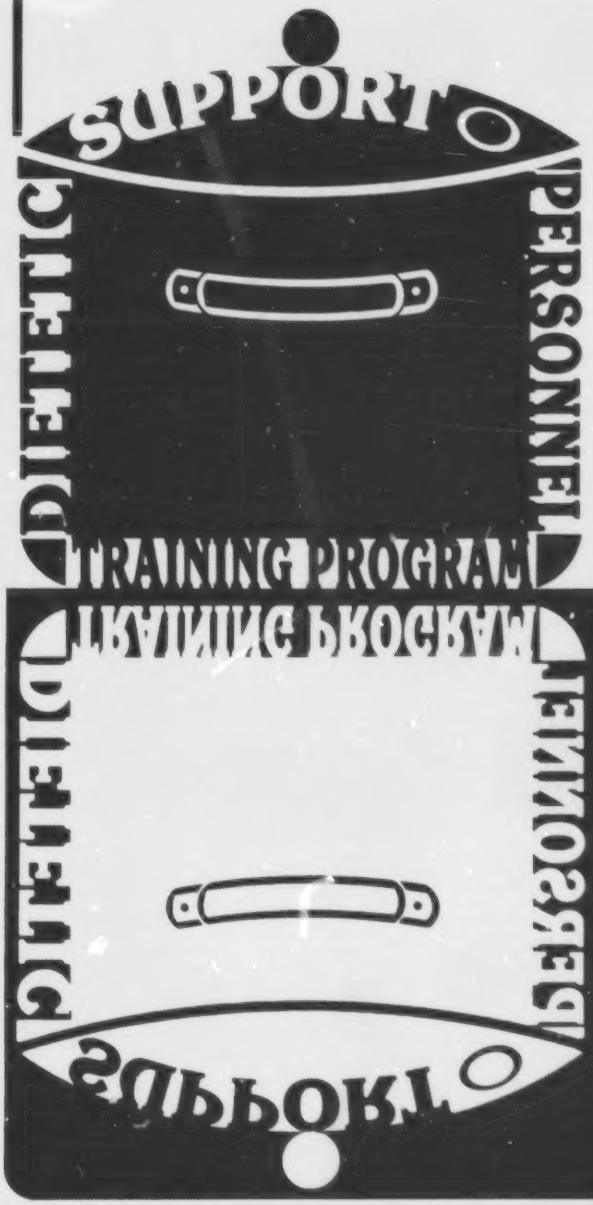

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Food Service Supervisor

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Vol. III of 3

Food Service Supervisor

Written by

Ellen Barker, R.D.
Oklahoma City, Oklahoma

Lou Hall, R.D.
Pauls Valley, Oklahoma

Barbara McGhee, R.D.
Tulsa, Oklahoma

Under the Supervision of
Judy Milroy, R.D.
Dietetic Assistant Program Specialist
State Department of Vocational and Technical Education
Stillwater, Oklahoma

Developed by the
Curriculum and Instructional Materials Center
For the Division of Business/Industrial Training Services
Donna Metcalf, Coordinator
Oklahoma State Board of Vocational and Technical Education
Leslie Fisher, Chairman
Francis T. Tuttle, Director
Bob Patton, Coordinator, Curriculum and Instructional Materials Center

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Curriculum and Instructional Materials Center

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FOOD SERVICE SUPERVISOR

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FOREWORD

We believe that the most effective way to improve vocational education is through a sound instructional materials delivery system. The development of the *Dietetic Support Personnel Training Program* curriculum to replace the *Dietetic Assistant* curriculum has been based on input from administrators, dietitians, certified dietetic assistants, educators, and others representing virtually every type of health care facility in the state.

Food Service Supervisor serves as the basic core of the occupationally sequenced *Dietetic Support Personnel Training Program*. Successful completion of this component will prepare the student for jobs such as dietetic services supervisor in a small health care facility department of dietetics under the supervision of a registered dietitian or supervisor of a unit within a department of dietetics in a larger health care facility. Successful completion of this component of the *Dietetic Support Personnel Training Program* leads to eligibility as a certified dietetic assistant.

This material provides a resource to both class and clinical instructors for greatly improving the quality of training provided for dietetic support personnel. Well-trained personnel from the dietetic departments of health care facilities have the potential to reduce cost while improving the quality of care provided.

Francis Tuttle, Director
Oklahoma State Department of Vocational
and Technical Education

Donna Metcalf, Coordinator
Business/Industrial Training
Services Division
Oklahoma State Department of Vocational
and Technical Education

PREFACE

The first formal program for training support personnel for health care facility dietetic departments was developed by Pauline Butler at University Medical Center in Oklahoma City. During the early 1960s, this program, approved by the American Dietetic Association, trained food service supervisors for Oklahoma City hospitals and nursing homes. In 1968, the need to provide such training throughout the state was recognized by Elizabeth Hensler, who was then Director of the Nutrition Division at the State Department of Health. Elizabeth Hensler and Mae Rollow, State Supervisor of Home Economics Division for State Department of Vocational and Technical Education at that time, worked together to set up a delivery system to provide this training statewide as needed. Many revisions have been made in the program since that time; however, none have been as extensive as the development of the current curriculum.

Food Service Worker, Food Production Worker, and *Food Service Supervisor* have been developed in response to a need expressed by former students, employers, and instructors to provide training for those involved in all aspects of preparing and serving foods in health care facilities. This new competency-based curriculum makes it possible to provide training that is job specific. Greater flexibility is combined with improved instructional materials for both instructors and students.

Throughout the planning and development phases of this project, a dedicated curriculum advisory committee and three conscientious and talented writers have cooperated fully with the staff of the Curriculum and Instructional Materials Center to produce a quality product. The result is a set of instructional materials that have the potential to make a significant contribution to improving the quality of nutritional care provided in health care facilities.

Judy Milroy
Dietetic Assistant Program Specialist
Curriculum and Instructional Materials Center
Oklahoma State Department of Vocational
and Technical Education

ACKNOWLEDGEMENTS

Sincere appreciation is expressed to the many individuals who have conscientiously contributed their time, talents, knowledge, and expertise during the development of this instructional materials package. Without their combined efforts, this publication would not have become a reality. The content of *Food Service Supervisor* was planned and reviewed by the following Dietetic Assistant Curriculum Advisory Committee members:

Ellen Barker, R.D., Instructor,
Consultant Dietitian
Oklahoma City, Oklahoma

Onah Bayless, R.D.
Institutional Services Division
Oklahoma State Department of Health
Oklahoma City, Oklahoma

Carol Beuch, R.D.
Children's Memorial Hospital
Oklahoma City, Oklahoma

Florene Chancey, R.D.
Dietetic Educator
Midwest City, Oklahoma

Naomi Dame, C.D.A.
President of Oklahoma HIEFSS
Bethany, Oklahoma

Glenyce Feeney, R.D.
Department of Corrections
Oklahoma City, Oklahoma

Lou Hall, R.D.
President of Oklahoma Dietetic Association
Pauls Valley, Oklahoma

Francille Hardeman
Institutional Services Division
Oklahoma State Department of Health
Oklahoma City, Oklahoma

Marcy Kirk
Adult Education Curriculum Specialist
State Dept. of Vo-Tech
Stillwater, Oklahoma

Bernice Kopel, Ed.D.
Dept. of Foods, Nutrition and
Institutional Administration
Oklahoma State University
Stillwater, Oklahoma

Barbara McGhee, R.D.
St. John's Hospital
Tulsa, Oklahoma

Jo Roth, R.D., Instructor
Consultant Dietitian
Stillwater, Oklahoma

Charlene Spencer, R.D., Chairperson
Oklahoma Consultant Dietitians/
Health Care Facilities
Ada, Oklahoma

Joyce Thompson, Supervisor
Home Economics Division
State Dept. of Vo-Tech
Stillwater, Oklahoma

Elsie Ward, C.D.A.
Food Service Director
Eastern State Hospital
Vinita, Oklahoma

Geraldine Williams, R.D., Instructor
Consultant Dietitian
Cherokee, Oklahoma

Esther Winterfeldt, Ph.D., R.D., Head
Department of Foods, Nutrition and
Institutional Administration
Oklahoma State University
Stillwater, Oklahoma

A special thank-you is extended to Charlotte Slemp, R.D. and St. John's Medical Center for allowing us to take photographs used in this curriculum.

The Graphics Division spent many dedicated hours in the physical production of the book. Under the supervision of Jenny Fowler, the Communications Center typed the drafts and typeset the final copy. Much of this work was done by Dona Landreth, Rose Primeaux, Pat Tate, Lori White, and Crissie Wickham. The Art Department provided a number of original illustrations and laid out the graphics used in the book. Finally, thanks to the staff of the Print Shop for the superb work done on final production. Noel Wilcoxson and his crew are to be commended.

Thank-you to Terra McCluskey, Susan Walker, Jerry Weir, Barbara Harrison, Sue Buck, Lynne Murnane, Terri Barnes, and Sue Feasley for their editorial assistance and to Dana Cole and Jim Thomas for their photography assistance.

And last, but not least, Bob Patton, Joyce Sawatzky, Marcy Kirk, Terra McCluskey, and the entire staff of the CIMC are to be commended for their dedication to this project. There were many "uncharted waters" to cross because this program was a first in many respects. Their patience, courage, and willingness to cooperate with all involved have made a tremendous contribution to a difficult and lengthy development project.

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USE OF THIS PUBLICATION

Instructional Units

Food Service Supervisor contains five sections and twenty-eight instructional units. A standard format was established in 1970 for the development of instructional materials for all Oklahoma vocational teachers. This format includes eight basic components that form a unit of instruction: performance objectives, suggested activities for the teacher, information sheets, assignment sheets, job sheets, transparency masters, tests, and answers to tests and assignment sheets. Depending on the specific objectives, there may or may not be transparency masters, assignment sheets, and job sheets included in the unit of instruction.

All of the unit components "zero in" on measurable and observable learning outcomes. Teachers are encouraged to supplement, personalize, localize, and motivate with these materials in order to develop a complete teaching/learning process.

Units of instruction are designed for use in more than one lesson or class period of instruction. Careful study of each unit of instruction by the teacher will help him or her determine the following

A. Amount of material that can be covered in each class period
B. Skills that must be demonstrated
    1. Supplies and equipment needed
    2. Amount of practice needed
    3. Amount of class time needed for demonstrations
C. Supplementary materials, such as pamphlets and filmstrips, that must be ordered
D. Resource people who must be contacted

Performance Objectives (white pages)

Each unit of instruction is based on the performance needed for successful employment in an occupational area. Performance objectives are stated in two forms: unit objectives, stating the subject matter to be covered in a unit of instruction, and specific objectives, stating the student performance necessary to reach the unit objective.

Since the objectives of the unit provide direction for the teaching/learning process, it is important that teachers and students have a common understanding of the intent of the objectives. Following is a list of performance terms, their meanings, and behavioral synonyms that may have been used in this material.

A. Name — The individual supplies a name for objects, events, or people

    Behavioral synonyms: Label, list, letter, record, reiterate, repeat, write

B. Identify — The individual selects a named, described, or pictured object by pointing to it, touching it, picking it up, or selecting it

    Behavioral synonyms: Select, mark, match, choose, judge

C. State a rule — The individual communicates a relationship or principle that could be used to solve problems or perform a task

D. Apply a rule — The individual supplies an answer to a problem by using a stated relationship or principle

Behavioral synonyms: Solve, calculate

E. Describe — The individual relates sufficient characteristics or properties of an object or event so that a second individual will be able to state what is being discussed

Behavioral synonyms: Define, discuss, interpret, recite, tell how, tell what happens when

F. Distinguish — The individual selects an object or event from two or more that are easily confused

Behavioral synonyms: Discriminate, differentiate

G. Order — The individual arranges three or more objects or events in a sequence based on a stated property

Behavioral synonyms: Arrange, sequence, list in order, classify, divide, isolate, sort

H. Construct — The individual makes a physical object, a verbal statement, or a drawing

(NOTE: *Construct* is used when the finished product or result is important.)

Behavioral synonyms: Draw, make, build, design, formulate, reproduce, transcribe, convert, put together, compile

I. Demonstrate — The individual performs several operations necessary to carry out a specified process

(NOTE: *Demonstrate* is used when it is desirable to watch the student perform a task, one of the highest levels of student performance.)

Behavioral synonyms: Show your work, show procedure, perform an experiment, perform the steps, operate, remove, replace, turn off/on, (dis)assemble, (dis)connect

The objectives should be provided for students and stressed throughout the teaching/learning process. This will help answer any questions concerning performance requirements for each instructional unit. The objectives can also help determine teaching strategies and instructional methods. Prepare for each unit by deciding how each objective can best be taught.

The objective sheet may also be used as a quick pretest to determine prior knowledge of students and to determine whether further study or activities are necessary. Teachers should feel free to modify, delete, or add objectives in order to meet the needs of the students and community. When changes in objectives are made, the teacher should remember to supply the needed information, assignment and/or job sheets, and criterion test items.

Suggested Activities (pink pages)

This component is included only in teacher material. The suggested activities page assists teachers during the preparation stage of the teaching/learning process by providing suggestions for delivery and/or presentation during the instructional process. Read the suggested activities before teaching the units so that supplemental materials can be obtained, audiovisual materials prepared, and outside resources contacted. Duties of the teacher will vary according to the particular unit.

The references that are listed are ones used in the development of each unit. They should be used by the teacher to supplement knowledge of the subject area or to help students with particular interests or occupational objectives in the area covered.

Information Sheet (green pages)

The information sheet provides "must know" content essential for meeting the cognitive (knowledge level) objectives of the unit. The information is written in a topical outline form and is keyed to the specific objectives.

Teachers will find that the information sheet serves as an excellent guide for presenting background knowledge necessary to develop the skills specified in the unit objective. The information sheet may also be used for coordination activities and advisory committees.

Students should read the information sheet before the information is discussed in class. Space is provided in margins for students and teachers to add notes that supplement, localize, personalize, or provide motivation for each unit.

Transparency Masters (white pages in teacher material and green in student material)

Transparency masters provide information in a special way. Transparencies direct the class' attention to the topic of discussion. Transparencies may present new information, or they may reinforce information presented in the information sheet. They are particularly effective when identification is necessary. Transparencies should be made and placed in the notebook where they will be immediately available for use.

Class Assignment Sheets (brown pages) and **Clinical Assignment Sheets** (grey pages)

Assignment sheets give students a chance at problem solving, self-assessment, and/or practical experience with the information. They assist students in the application of knowledges that are necessary prerequisites to skill development. These may be given to the student for completion in class or used for homework assignments. Answer sheets are provided when appropriate and can be used by the student and/or teacher for checking student progress.

Job Sheets (blue pages)

Job sheets are another important segment of a unit of instruction. The job sheets provide a list of equipment, tools, and materials needed to complete a manipulative or psychomoter skill. They describe a step-by-step procedure needed to complete each task or job. Diagrams, photographs, and illustrations are provided to assist students in achieving the skill.

A teacher should demonstrate to students the procedures outlined in each job sheet. Furthermore, the teacher needs to localize the job sheet according to the equipment and supplies available in the local situation. Job sheets also furnish potential employers with a picture of the skills being taught and the performances they might reasonably expect from a person who has had this vocational instruction.

Tests (yellow pages)

This component provides criterion-referenced evaluation of every objective listed in the unit of instruction. It is crucial to note that both paper/pencil and performance objectives must be evaluated.

The tests may be written or oral. It is recommended that the tests be divided into shorter tests covering three or four objectives at a time and given soon after those objectives have been covered. A selection of questions from the units covered may be used for final tests at the end of each term if desired. If objectives have been added, deleted, or modified, be sure to make the changes on the test.

The acceptable response on a unit test — 85 percent in most units -- may be raised or lowered to fit the topic or students' ability levels. The percentage applies to the overall score, not to each question. The final unit grade should be obtained by using the paper/pencil score along with teacher evaluations of student demonstrations of the desired skills.

Answers to Test and Assignment Sheets (pink pages)

These components are designed to assist the teacher in evaluation of student performances.

Page Numbering

Each publication from the Curriculum and Instructional Materials Center is assigned a specific abbreviation. For example, *Food Service Supervisor* has been abbreviated FSS. The sections are lettered alphabetically. The units are then numbered consecutively within each section. An example of a page number is FSS-1-A. Since CIMC publications are loose leaf, this system of page numbering was adopted so that pages from different manuals would not get mixed up.

Methods of Disseminating Material

Material may be given out a unit or page at a time to keep the material before the student always new. Some teachers ask students to furnish a three-ring binder for the units. This is more convenient for taking the materials home to study. Upon completion, each unit is placed in a larger binder. The large binders may be purchased at cost from the CIMC. Some teachers store the materials by units in filing cabinets or boxes until needed. All the units may be given out at once if desired.

For best results, provide student materials for each student. Student materials contain everything but the test answers, answers to assignment sheets, and suggested activities. All tests are collated at the back of student material and should be removed and stored until needed. Students should be allowed to take their materials home at the end of the year.

Teaching Methods

It is a challenge to keep students motivated. Supplement the objectives by providing the "why," personal experiences, and current information. Prepare for each unit by deciding how each objective can best be taught. Allow students to become involved in preparing and planning.

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

UNIT OBJECTIVE

After completing this unit, the student should be able to apply knowledge of the organization and functions of a health care facility dietary department in performing the job of a food service supervisor. The student should also be able to demonstrate appropriate ethical conduct. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with the field of dietetics to their correct definitions.
2. List the major roles of the field of dietetics in providing quality health care.
3. Describe the major areas of emphasis in field of dietetics.
4. Distinguish between administrative and clinical functions of a health care facility dietary department.
5. List reasons for having an organizational chart.
6. Identify positions in organizational charts for dietary departments in health care facilities of various sizes.
7. Match dietary department health care facility job titles to their correct job descriptions.
8. Match careers in dietetics to their correct educational requirements.
9. State advantages to the dietetic assistant of membership in the Hospital, Institution, and Educational Food Service Society (HIEFSS).
10. Describe appropriate ethical conduct for a food service supervisor.
11. Identify duties and responsibilities in the dietary department by job title.
12. Prepare a dietary department organizational chart.
13. Demonstrate appropriate ethical conduct for a food service supervisor.

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Order material to supplement unit.

      1. Slides — *Managers in Action.* 35 mm slides/cassette, n.d. Available from the Hospital, Institution, and Educational Food Service Society, 4410 Roosevelt Road, Hillside, Illinois 60162.

         (NOTE: This audiovisual program is available on loan basis to Oklahoma teachers by contacting the president of Oklahoma HIEFSS.)

      2. Brochures

         a. *Careers in Dietetics.* Available from The American Dietetic Association, 430 North Michigan Avenue, Chicago, Illinois 60611, n.d.

            (NOTE: This brochure outlines job responsibilities and educational requirements for the positions of registered dietitian, dietetic technician, and dietetic assistant.)

         b. *The Hospital, Institution, and Educational Food Service Society.* Available from the Hospital, Institution, and Educational Food Service Society, 4410 Roosevelt Road, Hillside, Illinois 60162, n.d.

            (NOTE: This brochure describes the history and objectives of HIEFSS as well as qualifications for membership and career opportunities.)

   B. Provide students with objective sheet.

   C. Discuss unit and specific objectives.

   D. Provide students with information and assignment sheets.

   E. Discuss information and assignment sheets.

   F. Develop appropriate learning activities for special needs students.

   G. Review *Food Service Worker,* Section A, Unit I, "Orientation to the Health Field and Dietetics."

   H. Invite a HIEFSS member to speak to the class about this organization and the benefits of membership.

   I. Ask the HIEFSS member to bring a copy of the HIEFSS "Standards of Conduct" to discuss with the class in relation to ethics for the food service supervisor.

SUGGESTED ACTIVITIES

- J. Give test.
- K. Reteach if necessary.

II. Instructional materials

- A. Objective sheet
- B. Suggested activities
- C. Information sheet
- D. Class Assignment Sheet #1 — Identify Duties and Responsibilities in the Dietary Department by Job Title
- E. Answers to class assignment sheet
- F. Clinical assignment sheets
    1. Clinical Assignment Sheet #1 — Prepare a Dietary Department Organizational Chart
    2. Clinical Assignment Sheet #2 — Interview Individuals with Careers in Dietetics
    3. Clinical Assignment Sheet #3 — Demonstrate Appropriate Ethical Conduct for a Food Service Supervisor
- G. Answers to clinical assignment sheets
- H. Test
- I. Answers to test

III. Unit references

- A. Knoll, Anne P. *Food Service Management: A Human Relations Approach.* New York: McGraw-Hill Book Company, Gregg Division, 1976.
- B. Mahaffey, Mary J., et al. *Food Service Manual for Health Care Institutions.* Chicago: American Hospital Association, 1981.
- C. "Position Paper on Recommended Salaries and Employment Practices for Members of The American Dietetic Association." *Journal of The American Dietetic Association,* Vol. 78 (January, 1981), pp. 62-73.
- D. West, B.B., et al. *Food Service in Institutions,* 5th ed. New York: John Wiley and Sons, Inc., 1977.

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

INFORMATION SHEET

I. Terms and definitions

   A. Organizational chart — Schematic illustration of departments and/or positions in a facility, showing how each job fits into overall staffing pattern of the department or facility

   B. Administrative — Pertaining to those functions of the dietary department related to provision of meals and overall management of the department

   C. Clinical — Relating to the provision of nutritional care in the form of nutrition education, assessment of nutritional status, planning of diet modifications, nutritional counseling, and other nutrition-related functions

   D. Hospital, Institution, and Educational Food Service Society (HIEFSS) — Professional membership society representing dietetic assistants and dietetic technicians for purpose of maintaining a high level of competency and quality in dietary departments of health care and educational facilities

   E. The American Dietetic Association (ADA) — Professional organization representing dietetic technicians and dietitians for purpose of ensuring quality nutritional care and information

   F. Ethics — Standards of conduct established as a moral guide to human behavior

II. Major roles of the field of dietetics in providing quality health care

   A. Promoting maintenance of good health through adequate nutrition

      EXAMPLES: Nutrition education
      Institutional food service

   B. Providing nutritional therapy as a component of medical care in treatment of illness

      EXAMPLES: Nutritional support in trauma
      Modification of diet in response to a specific disease process

   C. Conducting research to further knowledge of nutrition in health and disease

   D. Educating and training members of dietetic team

      EXAMPLES: Dietitians, dietetic technicians, dietetic assistants

INFORMATION SHEET

III. Major areas of emphasis in field of dietetics

  A. Food service systems management — Provides quality, nutritious foods to groups

  (NOTE: In a health care facility dietary department, food service systems management may be referred to as the ***administrative area*** and may be the responsibility of the administrative dietitian.)

  B. Nutritional care — Provides services related to meeting the needs of groups or individuals for nutrition education, diet therapy, and other forms of nutritional intervention

  (NOTE: In a health care facility dietary department, nutritional care may be referred to as the *clinical area* and may be the responsibility of the clinical dietitian.)

IV. Functions of a health care facility dietary department

  A. Administrative

    1. Planning menus
    2. Purchasing food, supplies, and equipment
    3. Receiving and storing food and supplies
    4. Standardizing recipes
    5. Preparing and serving food
    6. Maintaining sanitation and safety standards
    7. Maintaining equipment and physical facilities
    8. Controlling food, labor, and operating costs

  B. Clinical

    1. Screening and assessing nutritional status of patients
    2. Interviewing patients for food preferences and dietary habits
    3. Consulting with physicians, nurses, and other health team members regarding nutritional care of patients
    4. Developing nutritional care plans
    5. Calculating meal plans for modified diets

INFORMATION SHEET

6. Planning menus for modified diets
7. Counseling patients regarding diet modifications
8. Providing nutrition education for patients and personnel
9. Documenting nutritional care information

V. Reasons for having an organizational chart

A. To illustrate how each job fits into the overall organization

B. To show lines of authority and responsibility

(NOTE: The solid lines in an organizational chart indicate authority and responsibility.)

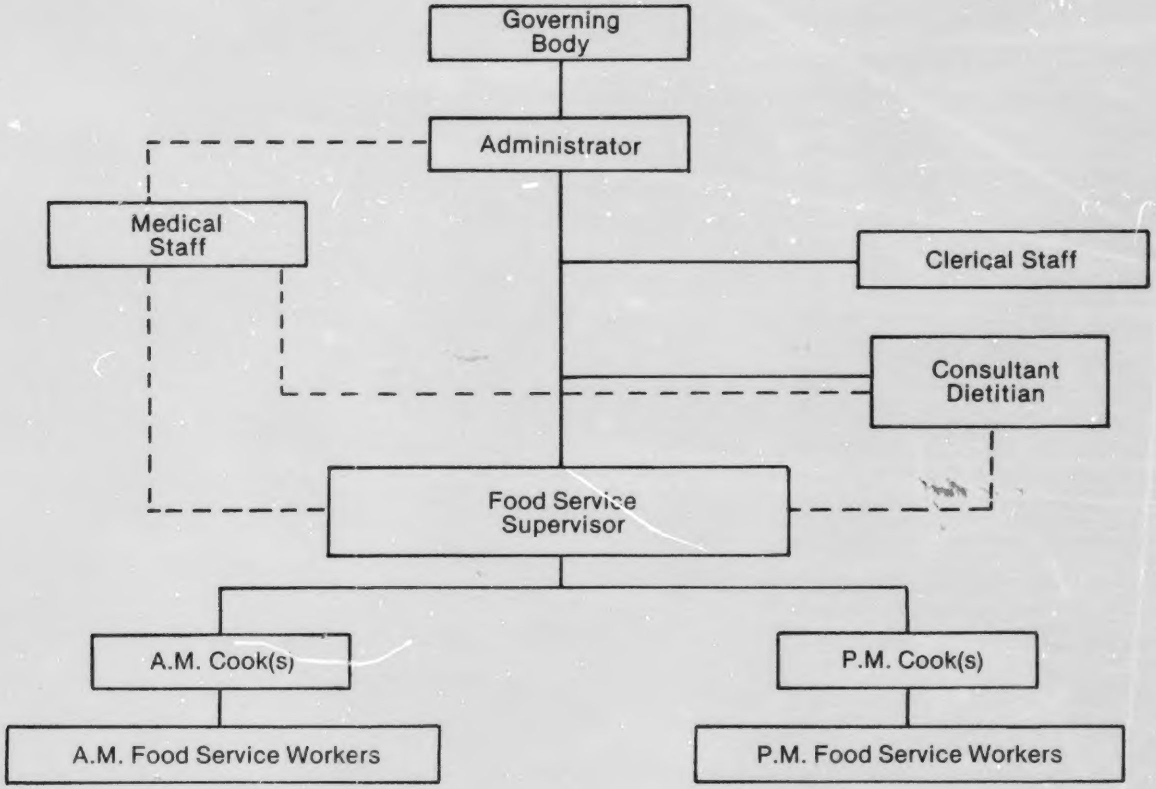
C. To show lines of communication and cooperation

(NOTE: The broken lines in an organizational chart indicate communication and cooperation.)

INFORMATION SHEET

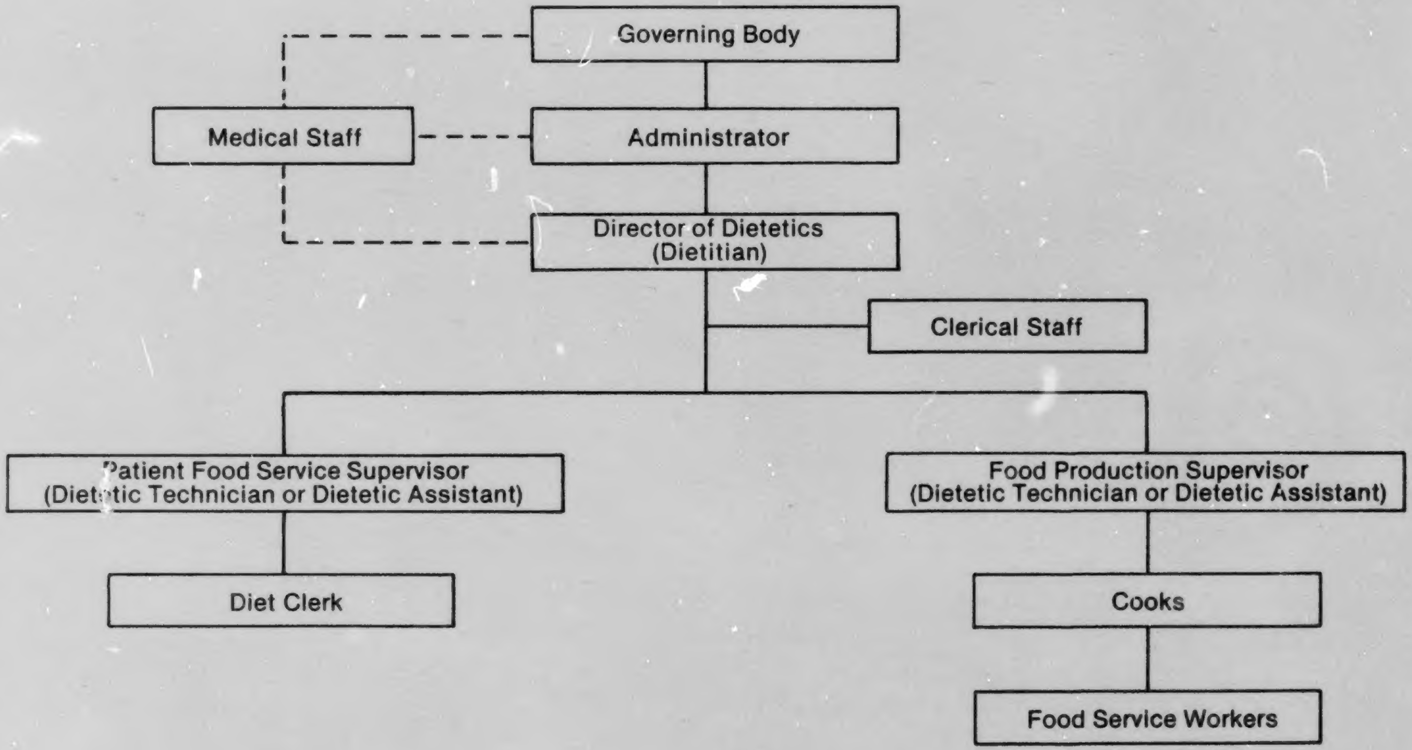
VI. Positions in organizational charts for dietary departments in health care facilities of various sizes (Clinical Assignment Sheet #1)

A. Small health care facility with consultant dietitian


Governing Body
Administrator
Medical Staff
Clerical Staff
Consultant Dietitian
Food Service Supervisor
A.M. Cook(s)
P.M. Cook(s)
A.M. Food Service Workers
P.M. Food Service Workers

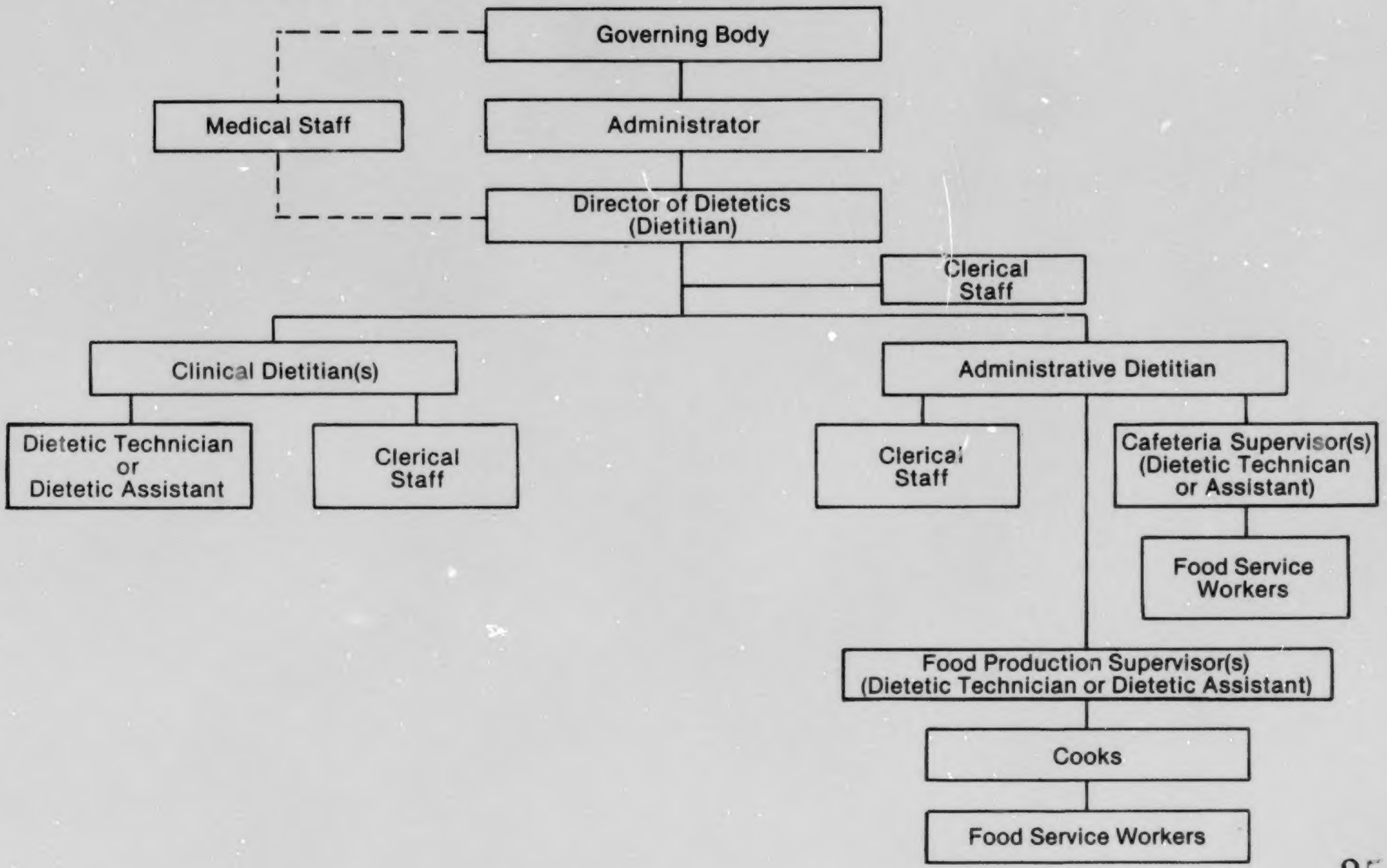
INFORMATION SHEET

B. Small health care facility with part-time dietitian or full-time dietitian


Governing Body
Medical Staff
Administrator
Director of Dietetics (Dietitian)
Clerical Staff
Patient Food Service Supervisor (Dietetic Technician or Dietetic Assistant)
Food Production Supervisor (Dietetic Technician or Dietetic Assistant)
Diet Clerk
Cooks
Food Service Workers

INFORMATION SHEET

C. Large health care facility with several full-time dietitians


Governing Body
Medical Staff
Administrator
Director of Dietetics (Dietitian)
Clerical Staff
Clinical Dietitian(s)
Administrative Dietitian
Dietetic Technician or Dietetic Assistant
Clerical Staff
Clerical Staff
Cafeteria Supervisor(s) (Dietetic Technican or Assistant)
Food Service Workers
Food Production Supervisor(s) (Dietetic Technician or Dietetic Assistant)
Cooks
Food Service Workers

INFORMATION SHEET

VII. Dietary department health care facility job titles and descriptions (Class Assignment Sheet #1)

A. Administrator — Responsible for directing the dietary department as part of the health care facility's total health care program

B. Full-time dietitian — Responsible for assessment, planning, implementation, and evaluation of dietary department functions

C. Consultant dietitian — Responsible for providing professional advice regarding operation of the dietary department and for teaching, training, and motivating dietary employees

(NOTE: A consultant has no authority for making changes and no responsibility for daily operation of the dietary department.)

D. Dietetic technician — Responsible for assisting in food service management or provision of nutritional care under the supervision of a registered dietitian

(NOTE: In a small facility, the technician may have both food service management and nutritional care responsibilities.)

E. Food service supervisor (dietetic assistant) — Responsible for carrying out delegated functions related to daily operation of dietary department or a designated portion of the dietary department

(NOTE: The food service supervisor [dietetic assistant] works under the supervision of a registered dietitian, a dietetic technician, or an administrator and a consultant dietitian.)

VIII. Educational requirements for careers in dietetics (Clinical Assignment Sheet #2)

A. Dietetic assistant (DA) or certified dietetic assistant (CDA)

1. Successful completion of an American Dietetic Association approved program that includes at least 90 hours of classroom work and 150 hours of supervised clinical experience

(NOTE: These individuals are eligible for certification by and membership in the Hospital, Institution, and Educational Food Service Society [HIEFSS].)

2. Maintenance of continuing education requirements as established by HIEFSS

(NOTE: Only certified dietetic assistants must complete continuing education requirements.)

INFORMATION SHEET

B. Dietetic technician (DT) or certified dietetic technician (CDT)

  1. Successful completion of an associate degree (two year) program of classroom and clinical experience that has been approved as meeting the standards established by The American Dietetic Association

     (NOTE: These individuals are eligible for technician membership in The American Dietetic Association and/or for certified dietetic technician membership in HIEFSS.)

  2. Maintenance of continuing education requirements as established by HIEFSS

     (NOTE: Only certified dietetic technicians must complete continuing education requirements.)

C. Registered dietitian (RD)

  1. Successful completion of a baccalaureate degree (four year) program in food service systems management, nutrition, or dietetics, *plus* completion of clinical experiences through any one of the following

     a. Coordinated undergraduate program

     b. Dietetic internship

     c. Three-year preapproved work experience

     d. Advanced degree (masters or doctorate) plus six months' qualifying work experience

  2. Successful completion of the registration examination of the Commission on Dietetic Registration

     (NOTE: Individuals who have met the above requirements are eligible for active membership in The American Dietetic Association and for registration with the Commission on Dietetic Registration.)

  3. Maintenance of continuing education requirements established by The American Dietetic Association

IX. Advantages to the dietetic assistant of membership in the Hospital, Institution, and Educational Food Service Society (HIEFSS)

  A. Recognition by employers that the dietetic assistant has met certain requirements of education and experience

INFORMATION SHEET

B. Recognition by employers and government representatives that the dietetic assistant has exceeded requirements of federal regulations for dietetic services supervisor for skilled nursing facilities

C. Availability of a certification program documenting continuing education toward professional growth and personal recognition

D. Opportunities to attend national, state, and district society meetings

E. Eligibility to wear insignia of the society

X. Appropriate ethical conduct for a food service supervisor (Clinical Assignment Sheet #3)

A. Toward patients

1. Treat all with dignity and respect

   (NOTE: Even though patients may be confused and act in a bizarre manner, do not ridicule or make fun of them.)

2. Show compassion

   (NOTE: Patience and compassion are required to work successfully in a health care facility. Individuals who are normally pleasant and cooperative may become irritable and difficult to please when they are ill.)

3. Handle confidential information appropriately

4. Follow facility's policy regarding acceptance of gifts or gratuities from patients or their families

B. Toward employer

1. Be loyal to your facility and employer

   (NOTE: If you cannot express loyalty to your facility and employer, it is desirable to seek employment elsewhere.)

2. Be productive

   (NOTE: Cooperate in every way to achieve the goals of your facility and employer. Do not waste time or use the employer's time for taking care of personal business.)

INFORMATION SHEET

3. Be honest and trustworthy

EXAMPLES: Do not accept kickbacks from vendors.
Do not misuse petty cash funds.

(NOTE: The food service supervisor may be responsible for thousands of dollars for purchasing, operating, and labor costs.)

C. Toward employees

1. Set a good example

(NOTE: It is unrealistic to expect employees to meet a standard you set but do not achieve yourself.)

EXAMPLES: Maintain clean and neat personal appearance.
Be honest.

2. Do not use your authority to further your own self-interests

EXAMPLE: Do not have cooks prepare a meal on the facility's time for you to take home to your guests.

3. Treat each person with dignity, respect, and equality

(NOTE: Do not ridicule the employee who is willing to work but slow to learn. Treating such individuals with dignity and respect, and channeling their abilities so that they experience a sense of accomplishment,can result in a loyal and valuable employee.)

D. Toward co-workers

1. Avoid spreading gossip or rumors

2. Do not blame others for errors you have made

3. Do not take credit for ideas or good work of others

4. Do not allow differences of opinion with co-workers to interfere with providing quality patient care

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

CLASS ASSIGNMENT SHEET #1 — IDENTIFY DUTIES AND RESPONSIBILITIES IN THE DIETARY DEPARTMENT BY JOB TITLE

NAME ______________________________ SCORE ______________

The responsibilities of the administrator, dietitian, and food service supervisor for performing dietary department functions may vary from one facility to another. Factors such as the size of the facility, staffing, and organizational structure require varied responsibilities. This assignment sheet is designed to encourage class discussion of what is an appropriate designation of responsibility, depending on the variables mentioned above.

PART I

Complete the checklist of duties and responsibilities on the following pages. Indicate the individual who you feel should carry out each duty or responsibility, by writing an "X" in the box under the appropriate job title. Because some duties and responsibilities overlap, you may mark more than one box for some items.

CLASS ASSIGNMENT SHEET #1

	Food Supervisor	Dietitian	Administrator
Prepare facility table of organization			
Write dietary department policies and procedures			
Assist in writing policies and procedures			
Provide final approval of policies and procedures			
Write dietary employee job descriptions			
Direct writing of job descriptions			
Provide final approval of job descriptions			
Make work schedules			
Write menus			
Approve menus for nutritional adequacy			
Recommend diet manual			
Keep meal census record			
Document dietitian's activities			
Prepare dietitian's consultation report			
Hold in-service training			
Standardize recipes			
Write routine therapeutic diets			
Write nonroutine therapeutic diets EXAMPLE: Write hyperlipoproteinemia diet.			
Train employees (cooks, dishwashers)			
Orient employees			

CLASS ASSIGNMENT SHEET #1

	Food Supervisor	**Dietitian**	**Administrator**
Check sanitation			
Supervise food preparation			
Perform purchasing			
Make budget			
Perform patient charting			
Contribute to patient care plans			
Visit patients			
Provide patient dietary counseling			
Provide diet interpretation to physician			
Supervise food supervisor			

CLASS ASSIGNMENT SHEET #1

PART II

After completing the checklist in Part I, discuss your answers with the class as directed by your instructor.

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

ANSWERS TO CLASS ASSIGNMENT SHEET

Evaluated to the satisfaction of the class instructor

FSS 21-A

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

CLINICAL ASSIGNMENT SHEET #1 — PREPARE A DIETARY DEPARTMENT ORGANIZATIONAL CHART

NAME ______________________________ SCORE ______________

It is important for the food service supervisor to understand how the dietary department fits into the overall organizational structure of the facility. Also, it is essential for the supervisor to understand how the dietary department is organized. This assignment sheet is designed to help you gain this knowledge.

PART I

A. Review with your clinical instructor a copy of the organizational chart for your facility. Describe how the dietary department fits into the overall organizational structure. Write your answer in the space provided.

B. How could you, as a food service supervisor, use the facility's organizational chart in performing your job?

(NOTE: Refer to Information Sheet, Section V, for assistance in answering this question.)

CLINICAL ASSIGNMENT SHEET #1

PART II

A. Prepare an organizational chart for your dietary department. Draw your chart in the space below.

CLINICAL ASSIGNMENT SHEET #1

B. With the assistance of your clinical instructor, compare your organizational chart with the one in your department's policy and procedure manual. Discuss how they differ. Record your comments in the space below.

C. How could you, as a food service supervisor, use the department organizational chart in performing your job?

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

CLINICAL ASSIGNMENT SHEET #2 — INTERVIEW INDIVIDUALS WITH CAREERS IN DIETETICS

NAME ______________________ SCORE ____________

In order to reinforce knowledge of the careers in dietetics, conduct the following personal interviews and record information obtained. Your clinical instructor will assist you in arranging the interviews.

PART I

Interview a registered dietitian (RD) and record the information obtained in the blanks provided.

A. Name ______________________

B. Educational background

High school ______________________

College degree(s) ______________________

____

____

Internship or other clinical experience ______________________

____

____

C. Membership in professional organizations ______________________

____

____

D. Specific professional work experience ______________________

____

____

____

____

____

CLINICAL ASSIGNMENT SHEET #2

E. Present job title and responsibilities ____________________

____

____

____

PART II

Interview a dietetic technician (DT) and record the information obtained in the blanks provided.

(NOTE: If a dietetic technician is not available, this part may be omitted.)

A. Name ____________________

B. Educational background

High school ____________________

College degree(s) ____________________

____

____

C. Membership in professional organizations ____________________

____

D. Present job title and responsibilities ____________________

____

____

____

PART III

Interview a certified dietetic assistant (CDA) and record the information obtained in the blanks provided.

A. Name ____________________

B. Educational background

High school ____________________

DA training program ____________________

____

CLINICAL ASSIGNMENT SHEET #2

C. Membership in professional organizations ____________________

____

____

D. Present job title and responsibilities ____________________

____

____

____

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

CLINICAL ASSIGNMENT SHEET #3 — DEMONSTRATE APPROPRIATE ETHICAL CONDUCT FOR A FOOD SERVICE SUPERVISOR

NAME ______________________________ SCORE ______________

Appropriate ethical conduct is important in any profession, but it is critical in the health care field. Complete the checklist in Part I on the following page, and then evaluate your answers in Part II.

CLINICAL ASSIGNMENT SHEET #3

PART I

Complete the following checklist to indicate how frequently you demonstrate appropriate ethical conduct. Write an "X" in the appropriate column for each item.

	Always	Sometimes	Never
Toward patients			
Treat all with dignity and respect			
Show compassion			
Handle confidential information appropriately			
Follow facility's policy regarding acceptance of gifts or gratuities from patients or their families			
Toward employees			
Are loyal			
Are productive			
Are honest and trustworthy			
Toward employees			
Set a good example			
Avoid using authority to further own self-interests			
Treat each with dignity, respect, and equality			
Toward co-workers			
Avoid spreading gossip or rumors			
Avoid blaming others for errors you have made			
Avoid taking credit for ideas or good work of others			
Avoid allowing personal differences of opinion with co-workers to interfere with providing quality patient care			

CLINICAL ASSIGNMENT SHEET #3

PART II

Review the checklist you completed in Part I. List every item you marked as "Sometimes" or "Never." Make recommendations for improving your ethical conduct for each of these items.

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

TEST

NAME ______________________________ SCORE ______________

1. Match terms associated with the field of dietetics to their correct definitions. Write the correct numbers in the blanks.

______a. Relating to the provision of nutritional care in the form of nutrition education, assessment of nutritional status, planning of diet modifications, nutritional counseling, and other nutrition-related functions

______b. Standards of conduct established as a moral guide to human behavior

______c. Professional membership society representing dietetic assistants and dietetic technicians for purpose of maintaining a high level of competency and quality in dietary departments of health care and educational facilities

______d. Schematic illustration of departments and/or positions in a facility, showing how each job fits into overall staffing pattern of the department or facility

______e. Professional organization representing dietetic technicians and dietitians for purpose of ensuring quality nutritional care and information

______f. Pertaining to those functions of the dietary department related to provision of meals and overall management of the department

1. The American Dietetic Association (ADA)
2. Ethics
3. Administrative
4. Hospital, Institution, and Educational Food Service Society (HIEFSS)
5. Organizational chart
6. Clinical

2. List three major roles of the field of dietetics in providing quality health care.

a. ______________________________

____

b. ______________________________

____

c. ______________________________

____

TEST

3. Describe the major areas of emphasis in field of dietetics.

   a. Food service systems management — ____________________________________

   ____

   ____

   b. Nutritional care — ____

   ____

   ____

4. Distinguish between administrative and clinical functions of a health care facility dietary department. Write an "A" in the blanks before administrative functions, and a "C" in the blanks before clinical functions.

_____a. Maintaining sanitation and safety standards

_____b. Purchasing food, supplies, and equipment

_____c. Planning menus for modified diets

_____d. Standardizing recipes

_____e. Providing nutrition education for patients and personnel

_____f. Consulting with physicians, nurses, and other health team members regarding nutritional care of patients

_____g. Controlling food, labor, and operating costs

_____h. Screening and assessing nutritional status of patients

_____i. Developing nutritional care plans

_____j. Calculating meal plans for modified diets

_____k. Planning menus

_____l. Counseling patients regarding diet modifications

_____m. Documenting nutritional care information

_____n. Interviewing patients for food preferences and dietary habits

_____o. Maintaining equipment and physical facilities

TEST

_____p. Preparing and serving food

_____q. Receiving and storing food and supplies

5. List two reasons for having an organizational chart.

a. ______________________________

____

b. ______________________________

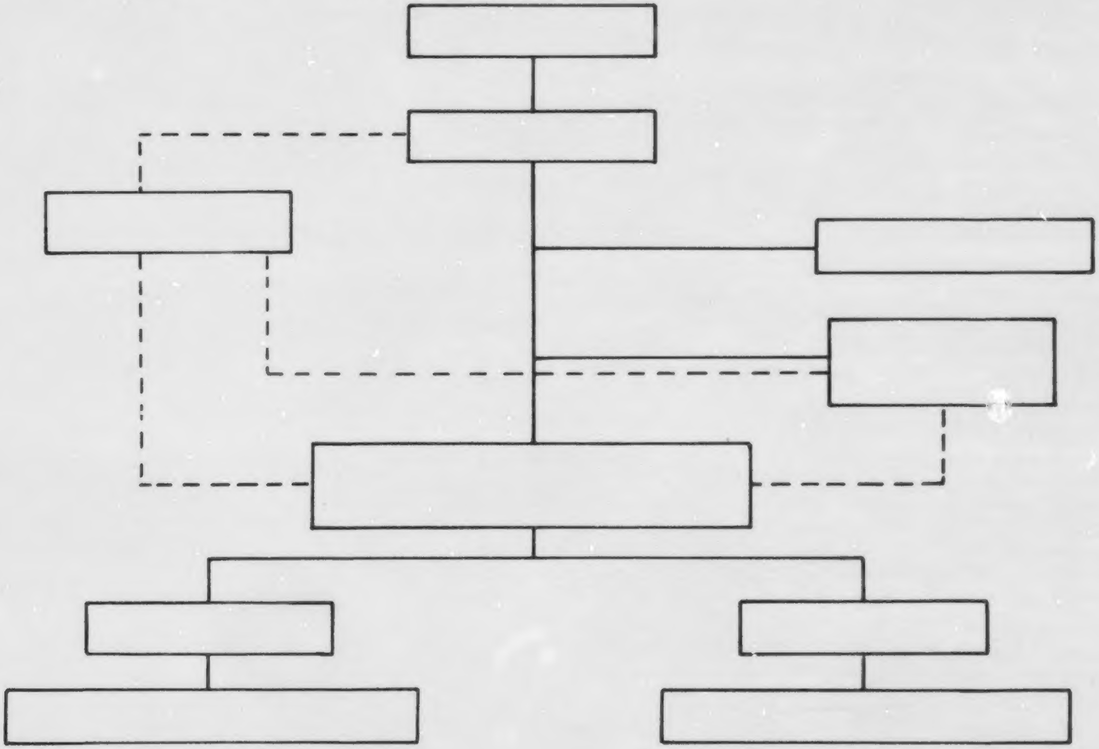
____

TEST

6. Identify positions in organizational charts for dietary departments in health care facilities of various sizes. Write the correct names in the blanks. Some answers may be used more than once.

a. Small health care facility with consultant dietitian

A.M. cook(s)
P.M. cook(s)
Clerical staff
Medical staff
A.M. food service workers
P.M. food service workers
Administrator
Food service supervisor
Governing body
Consultant dietitian



TEST

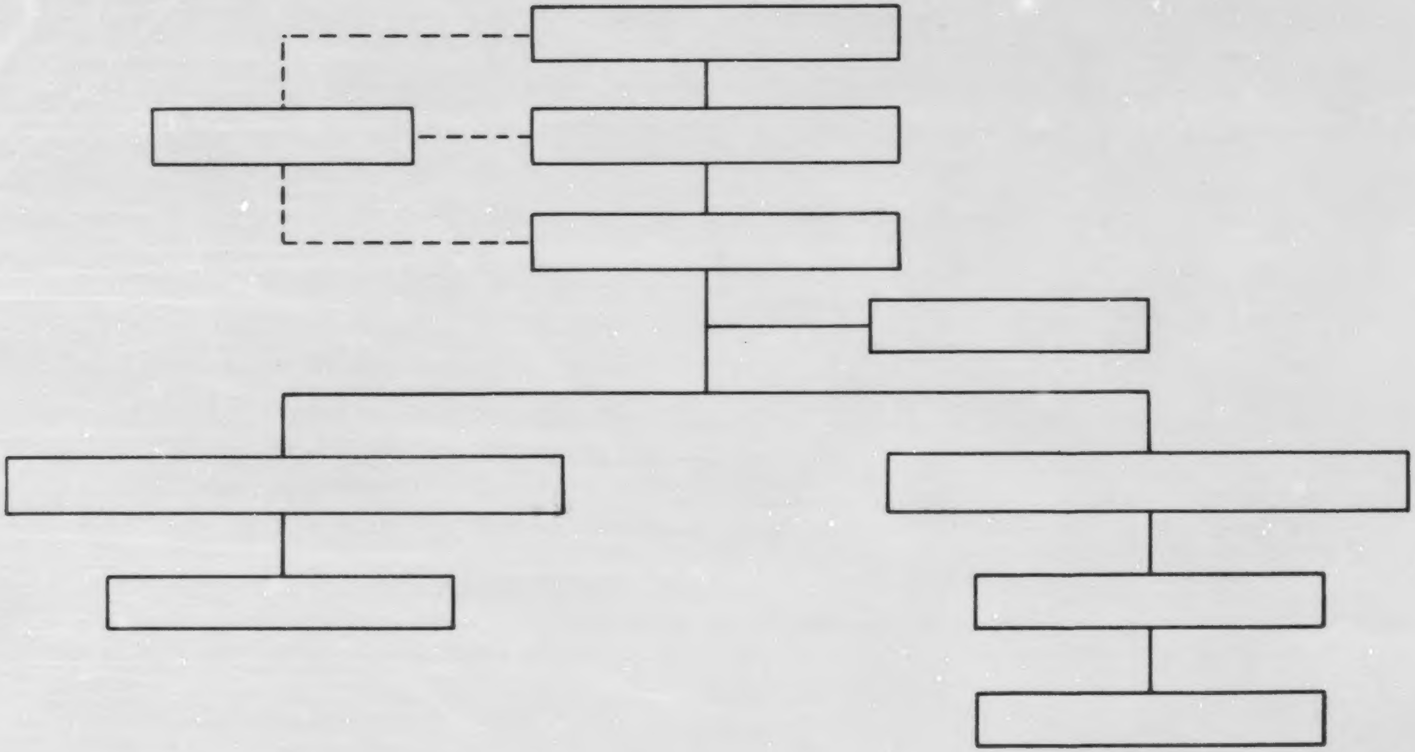
b. Small health care facility with part-time dietitian or full-time dietitian

Director of dietetics (dietitian)
Diet clerk
Clerical staff
Administrator

Food production supervisor (dietetic technician or dietetic assistant)
Governing body

Patient food service supervisor (dietetic technician or dietetic assistant)

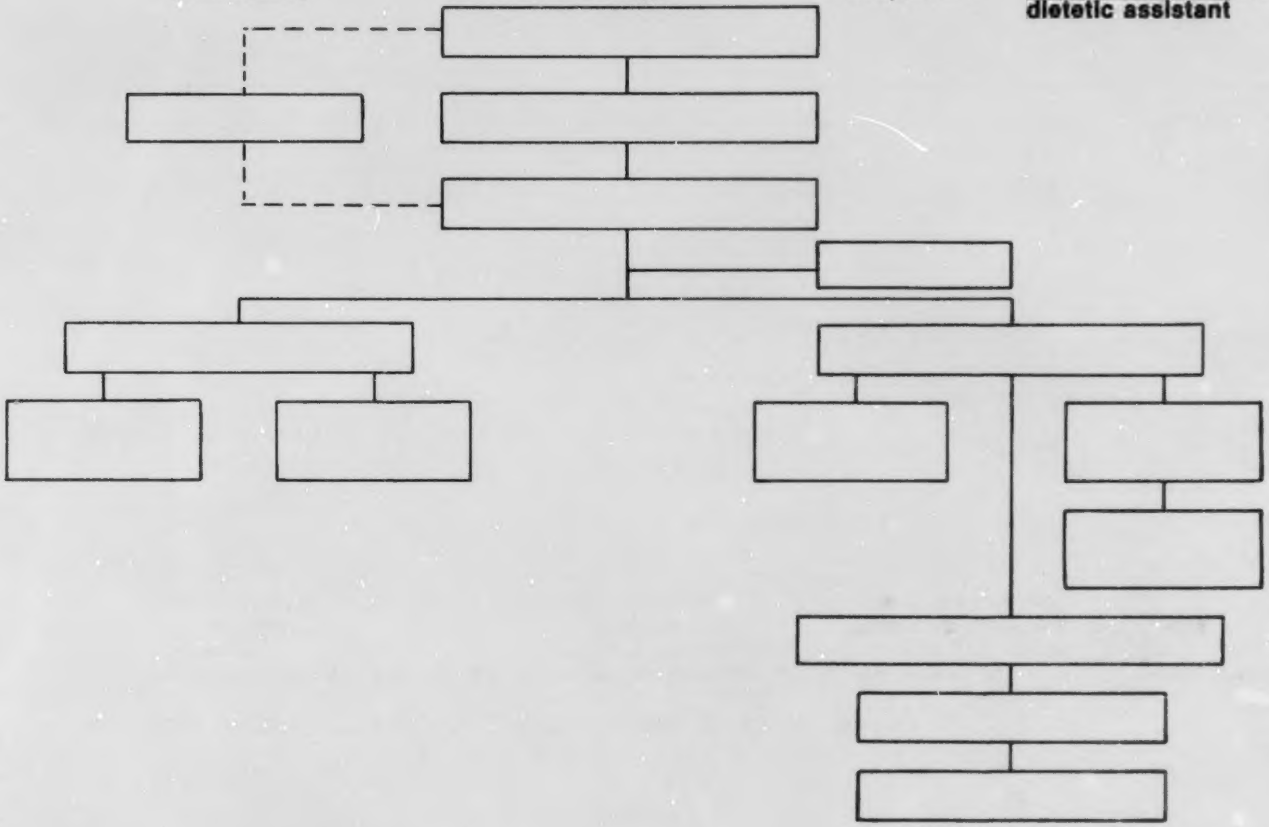
Medical staff
Food service workers
Cooks



TEST

c. Large health care facility with several full-time dietitians

Governing body
Cafeteria supervisor(s) (dietetic technician or assistant)
Director of dietetics (dietitian)
Administrative dietitian
Food service workers
Clinical dietitian(s)
Administrator
Cooks
Medical staff
Clerical staff
Food production supervisor(s) (dietetic technician or dietetic assistant)
Dietetic technician or dietetic assistant



TEST

7. Match dietary department health care facility job titles to their correct job descriptions. Write the correct numbers in the blanks.

______a. Responsible for assessment, planning, implementation, and evaluation of dietary department functions

______b. Responsible for assisting in food service management or provision of nutritional care under the supervision of a registered dietitian

______c. Responsible for directing the dietary department as part of the health care facility's total health care program

______d. Responsible for providing professional advice regarding operation of the dietary department and for teaching, training, and motivating dietary employees

______e. Responsible for carrying out delegated functions related to daily operation of dietary department or a designated portion of the dietary department

1. Administrator
2. Food service supervisor (dietetic assistant)
3. Consultant dietitian
4. Dietetic technician
5. Full-time dietitian

TEST

8. Match careers in dietetics to their correct educational requirements. Write the correct numbers in the blanks.

_____a. Successful completion of an associate degree (two year) program of classroom and clinical experience that has been approved as meeting the standards established by The American Dietetic Association; maintenance of continuing education requirements as established by HIEFSS

_____b. Successful completion of a baccalaureate degree (four year) program in food service systems management, nutrition, or dietetics, *plus* completion of clinical experiences through any one of the following: coordinated undergraduate program, dietetic internship, three-year preapproved work experience, advanced degree (masters or doctorate) plus six months' qualifying work experience; successful completion of the registration examination of the Commission on Dietetic Registration; maintenance of continuing education requirements established by The American Dietetic Association

_____c. Successful completion of an American Dietetic Association-approved program that includes at least 90 hours of classroom work and 150 hours of supervised clinical experience; maintenance of continuing education requirements as established by HIEFSS

1. Registered dietitian (RD)
2. Dietetic technician (DT) or certified dietetic technician (CDT)
3. Dietetic assistant (DA) or certified dietetic assistant (CDA)

9. State three advantages to the dietetic assistant of membership in the Hospital, Institution, and Educational Food Service Society.

a. ____

____

b. ____

____

c. ____

____

TEST

10. Describe appropriate ethical conduct for a food service supervisor. Include two items for each category.

    a. Toward patients

        1) ____

        ____

        2) ____

        ____

    b. Toward employer

        1) ____

        ____

        2) ____

        ____

    c. Toward employees

        1) ____

        ____

        2) ____

        ____

    d. Toward co-workers

        1) ____

        ____

        2) ____

        ____

(NOTE: Test questions 11-13 list assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

11. Identify duties and responsibilities in the dietary department by job title.

12. Prepare a dietary department organizational chart.

13. Demonstrate appropriate ethical conduct for a food service supervisor.

ORIENTATION TO THE FIELD OF DIETETICS
UNIT I

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 395. The point total for questions 1-10 is 195; the point total for questions 11-13 is 200.)

1. (12 points)

   a. 6
   b. 2
   c. 4
   d. 5
   e. 1
   f. 3

2. (9 points)

   Answer should include any three of the following

   a. Promoting maintenance of good health through adequate nutrition

   b. Providing nutritional therapy as a component of medical care in treatment of illness

   c. Conducting research to further knowledge of nutrition in health and disease

   d. Educating and training members of dietetic team

3. (6 points)

   Description should include the following

   a. Food service systems management — Provides quality, nutritious foods to groups

   b. Nutritional care — Provides services related to meeting the needs of groups or individuals for nutrition education, diet therapy, and other forms of nutritional intervention

4. (51 points)

   a. A
   b. A
   c. C
   d. A
   e. C
   f. C
   g. A
   h. C
   i. C
   j. C
   k. A
   l. C
   m. C
   n. C
   o. A
   p. A
   q. A

ANSWERS TO TEST

5. (6 points)

Answer should include any two of the following

a. To illustrate how each job fits into the overall organization

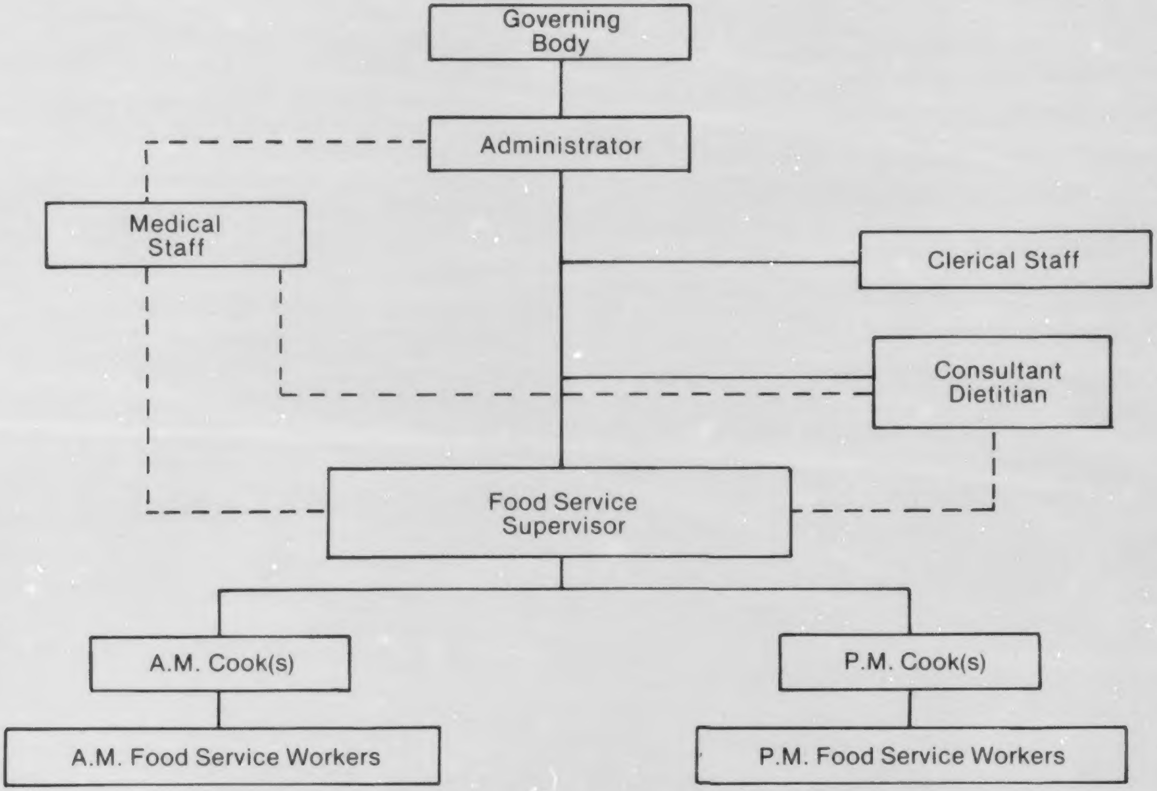
b. To show lines of authority and responsibility

c. To show lines of communication and cooperation

ANSWERS TO TEST

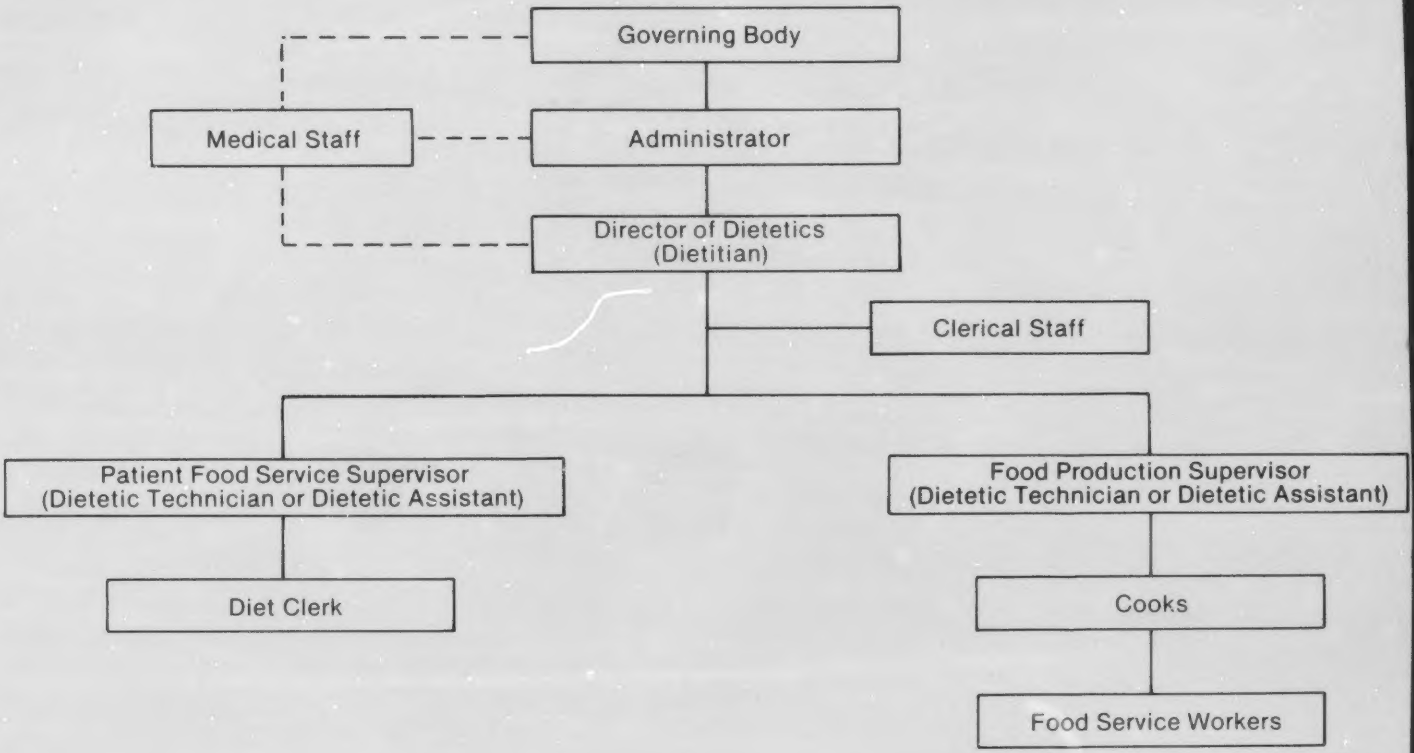
6. (70 points)

a. Small health care facility with consultant dietitian


Governing Body
Administrator
Medical Staff
Clerical Staff
Consultant Dietitian
Food Service Supervisor
A.M. Cook(s)
P.M. Cook(s)
A.M. Food Service Workers
P.M. Food Service Workers

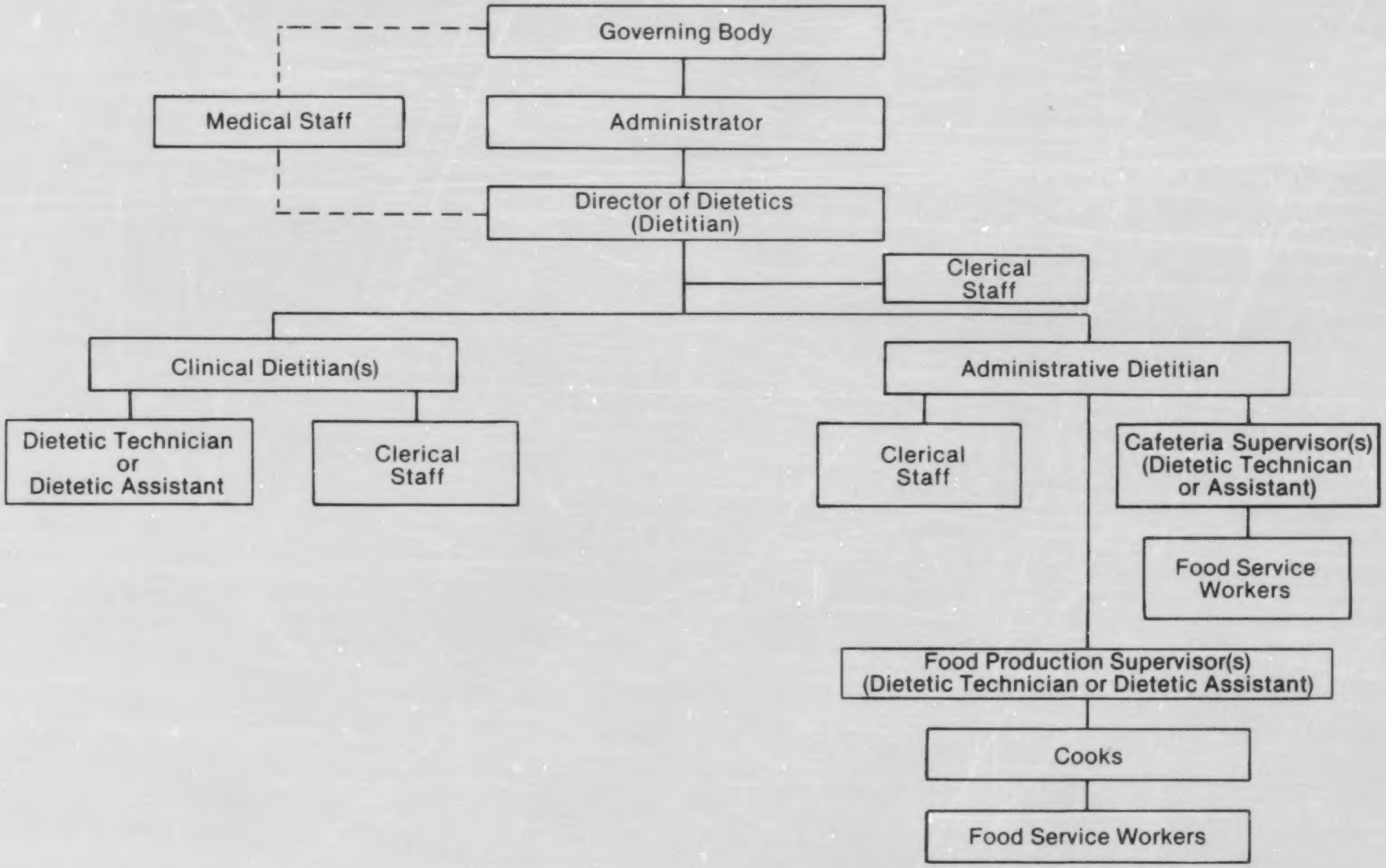
ANSWERS TO TEST

b. Small health care facility with part-time or full-time dietitian


Governing Body
Medical Staff
Administrator
Director of Dietetics (Dietitian)
Clerical Staff
Patient Food Service Supervisor (Dietetic Technician or Dietetic Assistant)
Food Production Supervisor (Dietetic Technician or Dietetic Assistant)
Diet Clerk
Cooks
Food Service Workers

ANSWERS TO TEST

c. Large health care facility with several full-time dietitians


Governing Body
Medical Staff
Administrator
Director of Dietetics (Dietitian)
Clerical Staff
Clinical Dietitian(s)
Administrative Dietitian
Dietetic Technician or Dietetic Assistant
Clerical Staff
Clerical Staff
Cafeteria Supervisor(s) (Dietetic Technican or Assistant)
Food Service Workers
Food Production Supervisor(s) (Dietetic Technician or Dietetic Assistant)
Cooks
Food Service Workers

ANSWERS TO TEST

7. (10 points)

   a. 5

   b. 4

   c. 1

   d. 3

   e. 2

8. (6 points)

   a. 2

   b. 1

   c. 3

9. (9 points)

   Answer should include any three of the following

   a. Recognition by employers that the dietetic assistant has met certain requirements of education and experience

   b. Recognition by employers and government representatives that the dietetic assistant has exceeded requirements of federal regulations for dietetic services supervisor for skilled nursing facilities

   c. Availability of a certification program documenting continuing education toward professional growth and personal recognition

   d. Opportunities to attend national, state, and district society meetings

   e. Eligibility to wear insignia of the society

10. (16 points)

    Description should include any two of the following for each category

    a. Toward patients

       1. Treat all with dignity and respect

       2. Show compassion

       3. Handle confidential information appropriately

ANSWERS TO TEST

    4. Follow facility's policy regarding acceptance of gifts or gratuities from patients or their families

  b. Toward employer

    1. Be loyal to your facility and employer
    2. Be productive
    3. Be honest and trustworthy

  c. Toward employees

    1. Set a good example
    2. Do not use your authority to further your own self-interests
    3. Treat each person with dignity, respect, and equality

  d. Toward co-workers

    1. Avoid spreading gossip or rumors
    2. Do not blame others for errors you have made
    3. Do not take credit for ideas or good work of others
    4. Do not allow differences of opinion with co-workers to interfere with providing quality patient care

11. Evaluated to the satisfaction of the class instructor (75 points)

12. Evaluated to the satisfaction of the clinical instructor (75 points)

13. Evaluated to the satisfaction of the clinical instructor (50 points)

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

UNIT OBJECTIVE

After completing this unit, the student should be able to evaluate a healthy individual's food intake. The student should also be able to use knowledge of basic nutrition to combat food misinformation. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with basic nutrition to their correct definitions.
2. Identify leader nutrients according to their functions.
3. Identify leader nutrients according to their sources.
4. Write abbreviations of leader nutrients.
5. List body functions that vitamins help regulate.
6. Select from a list the B-complex vitamins.
7. Match specific vitamins to results of their deficiencies.
8. List facts about vitamins and minerals in daily diet.
9. Match minerals to their correct functions.
10. Match number of calories provided by one gram each of metabolized protein, fat, and carbohydrate to their correct sources.
11. List the percentages of total calories of proteins, fats, and carbohydrates recommended in the daily diet.
12. Select from a list possible effects of excessive carbohydrates in diet.
13. Select from a list effects of excessive fats in diets.
14. List disadvantages of food misinformation.
15. Select from a list popular myths used by food faddists.
16. State the most effective means of preventing people from accepting false food claims.

OBJECTIVE SHEET

17. Calculate calories from grams of protein, fat, and carbohydrate.
18. Determine carbohydrate, protein, and fat content of one day's intake.
19. Evaluate day's menu for adequacy of iron.
20. Evaluate day's menu for adequacy of calcium for an individual who does not drink milk.
21. Evaluate a food product label.

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

SUGGESTED ACTIVITIES

I. Suggested activities

  A. Obtain materials planned to supplement unit.

    1. Booklets

      a. *Guide to Wise Food Choices.* Available from National Dairy Council, 6300 North River Road, Rosemont, Illinois 60018.

      (NOTE: This consumer booklet explains leader nutrient functions and the use of food groups and nutrition labeling in planning sound daily food intake.)

      b. *Calcium Throughout the Life Cycle.* Available from the National Dairy Council, 6300 North River Road, Rosemont, Illinois 60018.

      (NOTE: This booklet discusses the functions and dietary sources of calcium and explains how calcium is needed throughout the life cycle.)

      c. *Vitamins in Your Growing Years.* Available from Vitamin Information Bureau, Inc., 383 Madison Avenue, New York, New York 10017.

      d. *Vitamin* B_{15}*: Anatomy of a Health Fraud.* Available from American Council on Science and Health, 47 Maple Street, Summit, New Jersey 07901.

      e. *The Great Vitamin Mystery.* Available from National Dairy Council, 6300 North River Road, Rosemont, Illinois 60018.

    2. Films

      a. *Food, Energy and You.* Color, 16 mm, 18 minutes, Henk Newenhouse. Available from Association Films, Inc., 600 Grand Avenue, Richfield, New Jersey 07657.

      (NOTE: This film visually demonstrates how energy is stored in food, how food energy is converted to physical energy, and why different people require different amounts of energy. It counters many fads and fallacies about weight control.)

SUGGESTED ACTIVITIES

b. *Vitamins from Food.* Color, 16 mm, 18 minutes, Henk Newenhouse. Available from Association Films, Inc., 600 Grand Avenue, Richfield, New Jersey 07657.

(NOTE: This film dramatizes the discovery of cures for beriberi and scurvy; discusses the role of vitamins as enzymes that break down food to release stored energy; explains why vitamin pills can never take the place of foods; shows which foods are good sources for certain vitamins; and explains how our diet can provide all the vitamins we need.)

c. *Eat to Your Heart's Content.* Color, 16 mm, 12 1/2 minutes. Available from American Heart Association, Oklahoma Affiliate, P.O. Box 11376, Oklahoma City, Oklahoma 73136.

(NOTE: This film, narrated by Tony Randall, shows how a family learns to reduce the risk of heart attack by selecting foods low in saturated fat. It sums up what is wrong with our eating habits and explains how to correct those faults.)

d. *Let's Eat Food.* Color, 16 mm, 35 minutes. Available from McGraw-Hill Films, 110 Fifteenth Street, Del Mar, California 92014.

(NOTE: This film, narrated by Tony Randall, discusses today's eating habits, what these habits mean to our health, and how we can encourage good eating without sacrificing good taste.)

3. Filmstrip — *Food to Live On: Nutrition from the Twenties Through the Nineties.* Three filmstrips with audio cassettes, 10 to 12 minutes each, 1979. Available from Tupperware Educational Services, P.O. Box 2352, Orlando, Florida 32802.

(NOTE: This series gives an up-to-date approach to sound nutrition for busy, yet often inactive, lifestyles, and provides tips for wise food choices.)

4. Books

a. Deutsch, Ronald. *The New Nuts Among the Berries.* Palo Alto, California: Bull Publishing Co.

(NOTE: Find out where all the funny ideas about food come from, and about how little is new. This book presents the story of food faddists in America — all the nutty people who have exploited our desire for better health and our limited understanding of nutrition.)

SUGGESTED ACTIVITIES

b. Labuza, T.P. *Food for Thought.* Chicago, Illinois: National Restaurant Association.

(NOTE: This book discusses food, nutrition, food processing, food additives, food fads, dieting, and health for all who are confused by the glaring lack of nutrition education and the claims and counterclaims presented in bestselling books by popular writers, faddists, and quacks.)

5. Suggested references from the American Dietetic Association

(NOTE: An abundant supply of nutrition books are available in the marketplace. Many publications are scientifically sound; others are not. This list represents a variety of books that are good resources for personal, school, or public library collections.)

a. American Diabetes Association and the American Dietetic Association. *Family Cookbook.* Englewood Cliffs, New Jersey: Prentice-Hall, 1980.

b. Barrett, S., and G. Knight. *The Health Robbers.* Philadelphia: George F. Stickley Co., 1976.

c. Beller, Anne Scott. *Fat and Thin — A Natural History of Obesity.* New York: Farrar, Strause, & Giroux, 1977.

d. Berg, Francie M. *How to Lose Weight the Action Way: Young Adult/Teen Edition.* Hettinger, North Dakota: Flying Diamond Books, 1980.

e. Briggs, George M., and Doris H. Calloway. *Bogert's Nutrition and Physical Fitness.* Philadelphia: W.B. Saunders Co., 1979.

f. Buxbaum, Robert, and Lyle J. Michelli. *Sports for Life: Fitness Training, Injury Prevention and Nutrition,* 1979.

g. Cavaiani, Mabel. *The High-Fiber Cookbook.* Chicago: Contemporary Books, Inc., 1980.

h. Clydesdale, F.M., and F.J. Francis. *Food, Nutrition and You.* Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1977.

i. Darby, W.J., et al. *Food: The Gift of Osiris.* New York: Academic Press, 1977.

j. Dosti, Rose, Deborah Kidushim, and Mark Walke. *Light Style: The New American Cuisine.* San Francisco: Harper and Row, 1979.

SUGGESTED ACTIVITIES

k. Echols, Barbara E., and Jay M. Arena. *The Common Sense Guide to Good Eating*. Woodbury, New York: Barron's, 1978.

l. Eckstein, Eleanor F. *Food, People, and Nutrition*. Westport, Connecticut: AVI Publishing Co., Inc., 1980.

m. Ewald, E.B. *Recipes for a Small Planet*. New York: Ballantine Books, Inc., 1973.

n. *Food*, Home and Garden Bulletin #228. Washington, D.C.: United States Department of Agriculture, 1979.

o. Galandak, Diana J. *Food for Fitness: The Physical Education Teacher's Handbook*. New Orleans: St. Mary's Dominican College, 1981.

p. *Healthy People*. The Surgeon General's Report on Health Promotion and Disease Prevention, 1979. Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. (017-011-00416.)

q. Ikeda, Joanne, *For Teenagers Only: Change Your Habits to Change Your Shape*. Palo Alto, California: Bull Publishing Co., 1979.

r. Jerome, Norge W., Randy F. Kandel, and Greteal H. Pelto, eds. *Nutritional Anthropology: Contemporary Approaches to Diet and Culture*. Pleasantville, New York: Redgrave Publishing, Co., 1980.

s. Katz, Jeffrey D., and R. Katz. *Take It Off and Keep It Off: A Behavioral Program for Weight Loss and Healthful Living*. Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1977.

t. Konishi, F. *Exercise Equivalents of Foods*. Carbondale, Illinois: Southern Illinois University Press, Inc., 1974.

u. Lappe, F.M., and J. Collings. *Food First: Beyond the Myth of Scarcity*. Boston: Houghton Mifflin Co., 1977.

v. Lowenberg, M.E., et al. *Food and People*, 3rd ed. New York: John Wiley & Sons, 1979.

w. MacRae, Norma M. *Mushrooms 'n' Bean Sprouts: A First Step For Would-Be Vegetarians*. Seattle: Pacific Search Press, 1979.

SUGGESTED ACTIVITIES

x. Martin, Ethel Austin, and Ardath Anders Coolidge. *Nutrition in Action.* New York: Holt, Rinehart and Winston, 1978.

y. Mayer, J., and R. Kling. *31-day Reducing Diet.* New York: Newspaperbooks, 1975.

z. McGill, Marion, and Orrea Pye. *The No-Nonsense Guide to Food and Nutrition.* New York: Butterick Publishing, 1978.

aa. McNutt, Kristen W., and David R. McNutt. *Nutrition and Food Choices.* Chicago: Science and Research Associates, Inc., 1978

bb. Mottram, R. *Human Nutrition.* Westport, Connecticut: Food & Nutrition Press, Inc., 1979.

cc. *Nutrition and Your Health — Dietary Guidelines for Americans.* Department of Health and Human Services/USDA, Pamphlet #656A, 1980. Available from Consumer Information Center, Pueblo, Colorado 81009.

dd. *Nutritional References and Book Reviews.* Chicago: Chicago Nutrition Association, 1981.

ee. *Nutritive Value of Foods,* Home and Garden Bulletin #72. Washington, D.C.: United States Department of Agriculture, 1981.

ff. Robertson, L., C. Flinders, and B. Godfrey. *Laurel's Kitchen: A Handbook for Vegetarian Cookery and Nutrition.* California: Nilgiri Press, 1976.

gg. Robinson, C. *Fundamentals of Normal Nutrition,* 3rd ed. New York: Macmillian Publishing Co., 1978.

hh. Solomon, N., and M. Knudson. *Dr. Solomon's Easy, No-Risk Diet.* New York: Coward, McCann & Geoghegan, Inc., 1974.

ii. Stuart, Richard B., and Barbara Davis. *Slim Chance in a Fat World: Behavioral Control of Obesity.* Champaign, Illinois: Research Press Co., 1978.

jj. Suitor, Carol West, and Hunter Merrily Forbes. *Nutrition: Principles and Application in Health Promotion.* Philadelphia: J.B. Lippincott Co., 1980.

SUGGESTED ACTIVITIES

kk. *What's to Eat: And Other Questions Kids Ask About Food.* The USDA Yearbook 1979, Washington, D.C.: Government Printing Office, 1980.

ll. White, Alice, and the Society for Nutrition Education. *The Family Health Cookbook.* New York: David McKay Company, Inc., 1980.

mm. Whitney, Eleanor Noss, and E.M. Nunnelley Hamilton. *Understanding Nutrition.* New York: West Publishing Company, 1977.

B. Use various sources to locate nutrition information materials.

1. U.S. Department of Health and Human Services
Nutrition Coordinating Office
Hubert H. Humphrey Building
Room 728-F
200 Independence Avenue, S.W.
Washington, D.C. 20201
Telephone:
202/472-5308

2. Food and Drug Administration
Consumer Affairs Officer
Suite 470-13
500 S. Ervay
Dallas, Texas 75210
Telephone:
214/767-4533

3. U.S. Government Printing Office Bookstore
Federal Building
Room 1C50
1100 Commerce Street
Dallas, Texas 75242
Telephone:
214/767-0076

4. Consumer Information Center
Pueblo, Colorado 81009
Telephone:
303/544-5277

5. Superintendent of Documents
U.S. Government Printing Office
Washington, D.C. 20402
Telephone:
202/783-3238

6. U.S. Department of Health and
Human Services
Public Health Service
National Health Information Clearinghouse
P.O. Box 1133
Washington, D.C. 20013
Telephone:
202/436-6716

SUGGESTED ACTIVITIES

7. The Nutrition Foundation, Inc.
Office of Education
888 Seventeenth Avenue, NW
Suite 300
Washington, D.C. 20006
Telephone:
202/872-0778

8. National Research Council
2101 Constitution Avenue
Washington, D.C. 20418
Telephone:
202/393-8100

9. National Academy of Sciences
Office of Information
2101 Constitution Avenue, NW
Washington, D.C. 20418
Telephone:
202/393-8100

10. American Dietetic Association
430 N. Michigan Avenue
Chicago, Illinois 60611
Telephone:
312/280-5000

11. American Public Health Association
1015 15th Avenue, NW
Washington, D.C. 20005
Telephone:
202/789-5600

C. Obtain one of the following reference books needed to complete class and clinical assignment sheets.

   1. Pennington and Church. *Food Values of Portions Commonly Used.* Philadelphia: J.B. Lippincott Company, 1980.

   2. *Nutritive Value of Foods,* Home and Garden Bulletin #72. Washington, D.C.: United States Department of Agriculture, 1981.

D. Make transparencies.

E. Provide students with objective sheet.

F. Discuss unit and specific objectives.

G. Provide students with information and assignment sheets.

H. Discuss information and assignment sheets.

I. Develop appropriate learning activities for special needs students.

J. Cut out magazine pictures illustrating complete and incomplete proteins. Have students place them on bulletin board under their proper categories.

SUGGESTED ACTIVITIES

K. On chalkboard, have student calculate caloric value of one 2-inch diameter biscuit. The composition is 2 grams of protein, 3 grams of fat, and 15 grams of carbohydrate.

L. Have students prepare a chart showing the comparative values of calcium in several calcium-rich foods.

M. Have students investigate the symptoms of iron-deficiency anemia.

N. Have students make a list of foods high in carbohydrates that are usually consumed between meals.

O. Have students interview three people who take vitamin and/or mineral supplements daily and record the reasons these people do so.

P. Have students visit a drugstore or health food store to obtain information on vitamin B_{15}. Discuss this vitamin in class.

Q. Have students make a list of reliable nutrition information sources in the state.

R. Have each student write a letter requesting nutrition information from a reliable state resource. Share with class at a later date.

S. Show pictures or slides of people with vitamin and mineral deficiency diseases.

T. Give test.

U. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Transparency masters

1. TM #1 — Chemical Structures of Fats

2. TM #2 — Complementary Proteins

3. TM #3 — Thiamin (B_1)

4. TM #4 — Riboflavin (B_2)

SUGGESTED ACTIVITIES

5. TM #5 — Niacin (B_3)
6. TM #6 — B_6 (Pyridoxine)
7. TM #7 — B_{12} (Cobalamin)
8. TM #8 — Folacin (Folic Acid)
9. TM #9 — Biotin
10. TM #10 — Pantothenic Acid
11. TM #11 — Water Content of Foods

E. Class assignment sheets

1. Class Assignment Sheet #1 — Calculate Calories from Grams of Protein, Fat, and Carbohydrate
2. Class Assignment Sheet #2 — Determine Carbohydrate, Protein, and Fat Content of One Day's Intake
3. Class Assignment Sheet #3 — Complete a Nutrient Crossword Puzzle

F. Answers to class assignment sheets

G. Clinical assignment sheets

1. Clinical Assignment Sheet #1 — Identify Sources of Visible and Invisible Fat in Diet
2. Clinical Assignment Sheet #2 — Evaluate Day's Menu for Adequacy of Iron
3. Clinical Assignment Sheet #3 — Evaluate Day's Menu for Adequacy of Calcium for an Individual Who Does Not Drink Milk
4. Clinical Assignment Sheet #4 — Evaluate a Food Product Label

H. Answers to clinical assignment sheets

I. Test

J. Answers to test

SUGGESTED ACTIVITIES

III. Unit references

A. Chicago Dietetic Association. *Manual of Clinical Dietetics,* 2nd ed. Chicago: W.B. Saunders Company, n.d.

B. Lappe, F.M. *Diet for a Small Planet, rev.* New York: Ballantine Books, 1975.

C. McNutt, K.W., and D.R. McNutt. *Nutrition and Food Choices.* Chicago: Science Research Associates, Inc., 1978.

D. Robinson, C.H. *Basic Nutrition and Diet Therapy,* 4th ed. New York: MacMillan Publishing Company, Inc., 1980.

E. Rogers, H.V., and Ann Benson. *Practical Nursing I,* rev. by Jamee R. Sloan. Stillwater, Oklahoma: State Department of Vocational and Technical Education/Curriculum and Instructional Materials Center, 1981.

F. Stare, F.J., and M. McWilliams. *Living Nutrition,* 3rd ed. New York: John Wiley and Sons, 1981.

G. Williams, S.R. *Mowry's Basic Nutrition and Diet Therapy,* 6th ed. St. Louis: C.V. Mosby Company, 1980.

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

INFORMATION SHEET

I. Terms and definitions (Class Assignment Sheet #3)

A. Carbohydrates — Large group of chemical substances containing elements carbon, hydrogen, and oxygen

EXAMPLES: Starches, various kinds of sugars

B. Sugars — Simple carbohydrates

EXAMPLES: Honey, molasses, syrups, candy, table sugar

(NOTE: These sugars are known as simple sugars.)

C. Starches — Chief form of carbohydrates in diet; also known as *complex carbohydrates*

EXAMPLES: Breads, cereals, corn, potatoes, rice, pasta

D. Pasta — Food made chiefly from flour and water

EXAMPLES: Spaghetti, macaroni, noodles, ravioli, lasagna, vermicelli

E. Legumes — Plants that belong to pea family

EXAMPLES: Peas, beans, peanuts

(NOTE: The word *legume* means seed pods. There are about 13,000 kinds of legumes.)

F. Fats — Group of chemical substances composed of carbon, hydrogen, and oxygen but in different proportions than those in carbohydrates; constitute a much more concentrated form of food energy

(NOTE: Fats are composed of fatty acids and glycerol.)

G. Essential fatty acid — Fatty acid that must be present in diet because it cannot be synthesized in body

H. Glycerol — Unique, three-carbon alcohol; part of simple fats

I. Cholesterol — White, waxy substance related to fats but very different in chemical structure

(NOTE: Cholesterol is a normal constituent of body tissues, and it can be manufactured by the body.)

INFORMATION SHEET

J. Monounsaturated fat — Fat molecule that has one double bond; has no apparent effect on blood cholesterol level (Transparency #1)

EXAMPLE: Olive oil

K. Saturated fat — Fat molecule that cannot take up any hydrogen; abundant in animal fat; solid at room temperature (Transparency #1)

EXAMPLE: Butter

L. Polyunsaturated fat — Fat molecule that has two or more double bonds; can take up hydrogen; found in most vegetable oils; liquid at room temparature (Transparency #1)

EXAMPLE: Corn oil

M. Visible fat — Fat that can be seen with eye (Clinical Assignment Sheet #1)

EXAMPLES: Butter, shortening, oil, marbled fat in meat

N. Invisible fat — Fat that cannot be seen with eye (Clinical Assignment Sheet #1)

EXAMPLES: Fat in milk, egg yolk, food mixtures, chocolate, nuts

(NOTE: One-half the fat in our diet comes from the meat and milk group.)

O. Proteins — Chemical compounds containing carbon, hydrogen, oxygen, and nitrogen; essential to all living cells

(NOTE: The differences among proteins are largely a matter of the number, kind, and arrangement of amino acids.)

P. Amino acids — Building blocks of protein

Q. Essential amino acids — Amino acids that cannot be manufactured in the body; they must be present in the diet

EXAMPLES: Histidine, isoleucine, leucine, lysine, methionine, phenylalanine, threonine, tryptophan, valine

R. Complete protein — Chemical compound containing sufficient quantities of essential amino acids to sustain life and growth

EXAMPLES: Milk, cheese, meat, fish, poultry, eggs

INFORMATION SHEET

S. Incomplete protein -- Chemical compound lacking sufficient quantity of one or more essential amino acids to fully sustain life and growth (Transparency #2)

(NOTE: Incomplete proteins from vegetable sources such as beans, peas, or nuts may be complemented with other foods to supply the missing amino acid[s].)

EXAMPLES: Some food complements are red beans and rice, and a casserole of beans and corn tortillas.

T. Metabolism — General term for all chemical changes that occur in nutrients after they have been absorbed by body to be used in cells

U. Synthesis — Formation of chemical compounds

V. Basal metabolic rate (BMR) — Minimum amount of energy or number of calories needed to sustain life while body is at rest

(NOTE: The basal metabolic rate is also called *basal metabolism.*)

W. Acid-base balance — Function of normal metabolism necessary for health

EXAMPLE: Blood is slightly basic and varies only within narrow limits.

X. Enzymes — Substances formed by living cells that speed up chemical reactions; living catalysts

Y. Hemoglobin — Iron-containing coloring material in red blood cells

(NOTE: Hemoglobin carries oxygen from lungs to body tissues where it combines with food nutrients and yields energy.)

Z. Anemia — Decrease in amount of hemoglobin in blood and/or in number of red blood cells

AA. Leader nutrients — Key nutrients; if diet is adequate in these nutrients, it is likely to be adequate in other nutrients

BB. Recommended Dietary Allowances (RDA) — Levels of intake of essential nutrients considered to be adequate to meet known nutritional needs of practically all healthy persons in the United States

INFORMATION SHEET

II. Leader nutrients and their functions

LEADER NUTRIENTS	FUNCTIONS
Protein	Builds and repairs body tissues; regulates body functions; provides growth; supplies energy
Carbohydrate	Supplies energy for work activities; adds flavor and variety to diet; spares protein so that it can be used for body building and repair
Fat	Storage form for energy; supplies energy in compact form for activities; insulates body and helps maintain body temperature; carries fat-soluable vitamins
Vitamins	
Vitamin A	Helps vision in dim light; helps keep lining of mouth, nose, throat, and digestive tract healthy and resistant to infection
Vitamin D	Necessary for strong bones and teeth; needed by body to use calcium and phosphorus
Vitamin C (ascorbic acid)	Acts as cement between cells and helps them work together; aids in resistance to infection; helps in healing of wounds
Thiamin (vitamin B_1) Riboflavin (vitamin B_2) Niacin (vitamin B_3)	Necessary for healthy skin and nerves; promotes good appetite and digestion; helps body cells obtain energy from food (enzyme action)

INFORMATION SHEET

LEADER NUTRIENTS	FUNCTIONS
Minerals	
Calcium	Builds and repairs bones and teeth; controls clotting of blood; regulates activity of nerves, heart, and other muscles
Phosphorus	Associates with calcium in body to build and repair bones and teeth; necessary for foods to be used by the cells
Iron	Builds and repairs hemoglobin; helps cells use oxygen; necessary in release of energy
Iodine	Necessary for development and functioning of thyroid gland; prevents goiter; regulates basal metabolic rate
Sodium	Helps maintain water and acid-base balance of body; necessary for proper muscle contraction
Potassium	Helps maintain water balance of body; essential for body to make proteins; needed for transmission of nerve impulses and for proper muscle contraction
Water	Carries nutrients to body cells and waste products away from cells; helps regulate body processes such as digestion; aids in regulation of body temperature (Transparency #11)

III. Leader nutrients and their sources (Clinical Assignment Sheet #4)

LEADER NUTRIENTS	SOURCES
Protein	*Complete:* Meat, fish, poultry, eggs, cheese, milk *Incomplete:* Dried beans and peas, nuts, whole-grain cereals
Carbohydrate	Breads, cereals, fruits, starchy vegetables, any food containing flour or sugar, sugar, syrup, jelly
Fat	*Visible:* Butter, margarine, cooking oils, salad dressings *Invisible:* Meats, milk, cream, nuts, cheese (Clinical Assignment Sheet #1)

INFORMATION SHEET

LEADER NUTRIENTS	SOURCES
Vitamins	
Vitamin A	Liver; egg yolk; fortified margarine; butter; whole milk; *deep yellow* fruits and vegetables, such as apricots, cantaloupe, carrots; *dark green* vegetables, such as broccoli, turnip greens, dark salad greens
Thiamin (vitamin B_1)	Lean pork, organ meats, other meats, whole or enriched grains in cereals or breads, eggs, dried beans and peas
Riboflavin (vitamin B_2)	Meats, fish, poultry, organ meats, egg, dairy products, dark green leafy vegetables, enriched or whole-grain bread and cereal
Niacin (vitamin B_3)	Meats, fish, poultry, peanut butter, dairy products, dark green leafy vegetables, enriched or whole-grain bread and cereal
Vitamin C (ascorbic acid)	Citrus fruits, tomatoes, raw cabbage, cantaloupe, strawberries, green peppers, whole potatoes cooked in skin
Vitamin D	Fortified milk, eggs, fish-liver oil, exposure to sunlight
Minerals	
Calcium	Milk and dairy products except butter, and dark green leafy vegetables such as collards, mustard, turnip greens (Clinical Assignment Sheet #3)
Phosphorus	Wide variety of foods such as milk, eggs, liver, dried beans and peas, nuts, cheese, whole-wheat products
Iodine	Iodized salt, saltwater fish, shellfish
Iron	Liver, egg yolk, oysters, lean meat, molasses, dried fruits, broccoli, green leafy vegetables, whole-grain or enriched bread and cereal if eaten in quantity (Clinical Assignment Sheet #2)
Sodium	Salt, baking powder, baking soda, processed foods, meats, milk, breads, meat tenderizers, water softeners
Potassium	Meats, potatoes, peanut butter, dried fruits, oranges, tomatoes, grapefruit, bananas (NOTE: Many salt substitutes contain potassium.)
Water	Milk, fruits, vegetables; found in most foods (Transparency #11)

INFORMATION SHEET

IV. Abbreviations of leader nutrients

- A. Pro — Protein
- B. CHO — Carbohydrate
- C. Ca — Calcium
- D. Na — Sodium
- E. K — Potassium
- F. H_2O — Water
- G. Fe — Iron

  (NOTE: Iron is found in food in ferric form, which must be reduced to ferrous form to be absorbed.)

- H. P — Phosphorous
- I. I — Iodine

V. Body functions that vitamins help regulate

- A. Digestion
- B. Cell metabolism
- C. Growth and development
- D. Reproduction
- E. General good health
- F. Appetite
- G. Resistance to illness

VI. B-complex vitamins (Transparencies #3-#10)

- A. Thiamin (B_1)
- B. Riboflavin (B_2)
- C. Niacin (B_3)
- D. Pyridoxine (B_6)

INFORMATION SHEET

E. Cobalamin (B_{12})

(NOTE: Vitamin B_{12} contains cobalt.)

F. Folacin (folic acid)

(NOTE: Folacin means *green leaf.*)

G. Biotin

H. Pantothenic acid

(NOTE: Pantothenic means *everywhere.*)

VII. Results of deficiencies in specific vitamins

A. Vitamin A

(NOTE: Vitamin A deficiency is second only to protein-calorie malnutrition as the most prevalent deficiency disease in the world.)

1. Night blindness, a condition characterized by difficulty adjusting vision from light to dark

EXAMPLES: Irritation from glare of automobile headlights; difficulty finding seat in darkened theater

2. Lowered resistance to infection

(NOTE: Eye, skin, and respiratory infections are common.)

3. Blindness if untreated

B. Vitamin D — Rickets, a condition characterized by bowed legs, enlarged joints, and softened bones due to improper utilization of calcium and phosphorous

(NOTE: Rickets generally results from dietary lack of vitamin D and inadequate exposure to sunshine.)

C. Vitamin C — Scurvy, a condition characterized by easy bruising and hemmorhaging of skin, loosening of teeth, bleeding of gums, and weakening of cartilages that support skeleton

(NOTE: Scurvy was very prevelant among sailors in the sixteenth century.)

INFORMATION SHEET

D. Thiamin (B_1) — Beriberi, a condition characterized by disease of nerves, heart disease, and edema

(NOTE: In America, severe thiamin deficiency is seen mainly in chronic alcoholics.)

E. Riboflavin (B_2)

1. Redness and burning of eyes
2. Extreme eye sensitivity to strong light
3. Cheilosis — Cracking of skin at corners of lips

F. Niacin (B_3) — Pellagra, a condition characterized by inflammation of skin, diarrhea, and mental changes including depression and confusion

(NOTE: Pellagra is sometimes referred to as the Four D's — dermatitis, diarrhea, dementia, and death.)

VIII. Facts about vitamins and minerals in daily diet

A. Have no caloric value

B. Regulate metabolism

C. Are essential to life

D. Are obtained in sufficient quantities for most people by eating a varied well-balanced diet that includes those foods in the Daily Food Guide

IX. Minerals and their functions

A. Fluoride — Strengthens bones and teeth; increases resistance to dental caries; lessens incidence of osteoporosis (condition in which bone mass diminishes)

(NOTE: Tooth decay decreases as much as 60 percent if water contains sufficient fluoride.)

B. Zinc — Promotes normal growth and sexual maturation, normal sense of taste and smell, synthesis of proteins, and wound healing; used in body's production of insulin

(NOTE: Zinc is found in protein foods.)

C. Cobalt (component of vitamin B_{12}) — Aids in maturation of red blood cells

INFORMATION SHEET

D. Copper — Is catalyst for formation of hemoglobin

E. Sulfur — Contributes to the rigid structures of hair, nails, and skin; necessary in the structures of certain amino acids; essential component of the B-complex vitamins thiamin and biotin

F. Magnesium — Regulates nervous irritability and muscle contraction; alcoholism causes deficiency

(NOTE: Sixty percent of the body's magnesium is found in bones and teeth.)

X. Number of calories provided by one gram each of metabolized protein, fat, and carbohydrate (Class Assignment Sheet #1)

(NOTE: Although alcohol cannot be classified as a nutrient, it does furnish 7 calories per gram.)

A. Protein — 4 calories

(NOTE: One paper clip weighs approximately 1 gram.)

B. Carbohydrate — 4 calories

C. Fat — 9 calories

(NOTE: Weight for weight, fat supplies twice as much energy as protein or carbohydrate.)

XI. Precentages of total calories of proteins, fats, and carbohydrates recommended in daily diet

A. Proteins — 10 to 15 percent

B. Fats — 25 to 30 percent

(NOTE: Fat makes up 40 percent or more of most Americans' daily food intake. In countries where fat intake is approximately 20 percent of total calories, the incidence of premature hardening of the arteries is lower.)

C. Carbohydrates — 40 to 55 percent

XII. Possible effects of excessive carbohydrates in diet (Class Assignment Sheet #2)

A. Increased incidence of dental caries

B. Obesity

C. Irritation of gastrointestinal tract

INFORMATION SHEET

D. Depressed appetite

(NOTE: If empty-calorie food is consumed instead of food from the Daily Food Guide, malnutrition can result. Empty-calorie foods are those with little or no food value except calories, such as refined sugar, alcohol, and soft drinks.)

XIII. Effects of excessive fats in diet (Class Assignment Sheet #2)

A. Obesity

B. Ketosis (unless adequate carbohydrates are present to oxidize fats)

(NOTE: The complete oxidation of fats requires some carbohydrate. When too little carbohydrate is available, some fatty acids known as *ketones* accumulate, resulting in ketosis.)

C. Increased incidence of heart disease, diabetes mellitus, gallbladder disorders, renal disease, cerebral hemorrhage

XIV. Disadvantages of food misinformation

A. Faddism appeals to emotions and thrives where there is lack of knowledge

B. Fake diagnostic machines, health foods, pills to cure diseases, and other products waste billions of dollars each year

C. Claims for guaranteed results by health quacks cause many to postpone obtaining needed medical help

D. May lead to increased expenditure of money for a nutritionally poor diet

EXAMPLE: Misleading advertising encourages purchase of a product such as a caramel-type candy bar, saying that it is nutritious because it contains milk and eggs and provides quick energy.

E. Bizarre weight reduction plans may seriously alter body metabolism

F. Overuse or misuse of vitamins and/or minerals may alter metabolism

XV. Popular myths used by food faddists

A. Most disease is due to faulty diet

B. Soil depletion causes malnutrition

C. Most foods available to consumers are overprocessed and nutritionally deficient

INFORMATION SHEET

D. Subclinical deficiencies are a constant danger

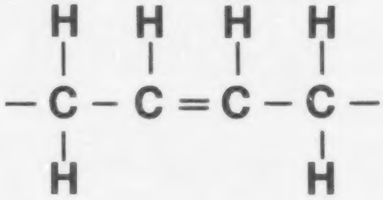
EXAMPLE: A claim that even though the physician's lab test shows no evidence of anemia, one should still take extra vitamins and mineral supplements for good health and energy

XVI. Most effective means of preventing people from accepting false food claims — Nutrition education

(NOTE: Nutrition information should be obtained from reliable sources such as State Health Department, Dietetic Association, Heart Association, Dairy Council, Inc., State Department of Vocational and Technical Education, and County Extension Home Economists.)

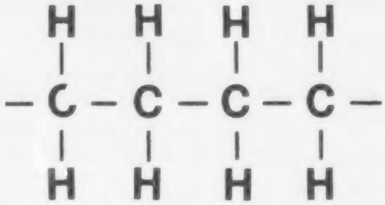
Chemical Structures of Fats

Monounsaturated Fat



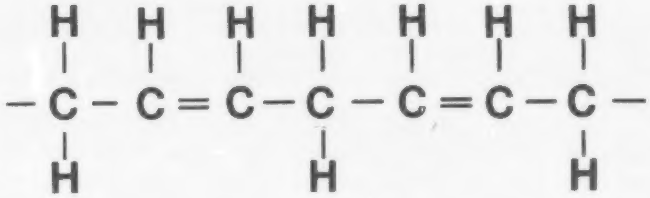
$$-CH_2-CH=CH-CH_2-$$

Saturated Fat



$$-CH_2-CH_2-CH_2-CH_2-$$

Polyunsaturated Fat



$$-CH_2-CH=CH-CH_2-CH=CH-CH_2-$$

FSS - 27-B

Complementary Proteins

Food Groups	Complementary Food Combinations
Legumes	Legumes with rice
	Soybeans with rice and wheat
	Soybeans with corn and milk
	Soybeans with wheat and sesame seeds
	Soybeans with peanuts and sesame seeds
	Beans with wheat or corn
Grains	Rice with legumes
	Rice with milk and milk products
	Rice with brewer's yeast
	Corn with legumes
	Wheat with legumes
	Wheat with milk and milk products
	Wheat with peanuts and milk
	Wheat with sesame seeds and soybeans
Vegetables	Lima beans, peas, brussels sprouts, cauliflower or broccoli with sesame seeds and Brazil nuts and mushrooms
Nuts and Seeds	Peanuts with sesame seeds and soybeans
	Peanuts with milk and milk products
	Peanuts with sunflower seeds
	Peanuts with wheat and milk
	Sesame seeds with beans
	Sesame seeds with soybeans and wheat

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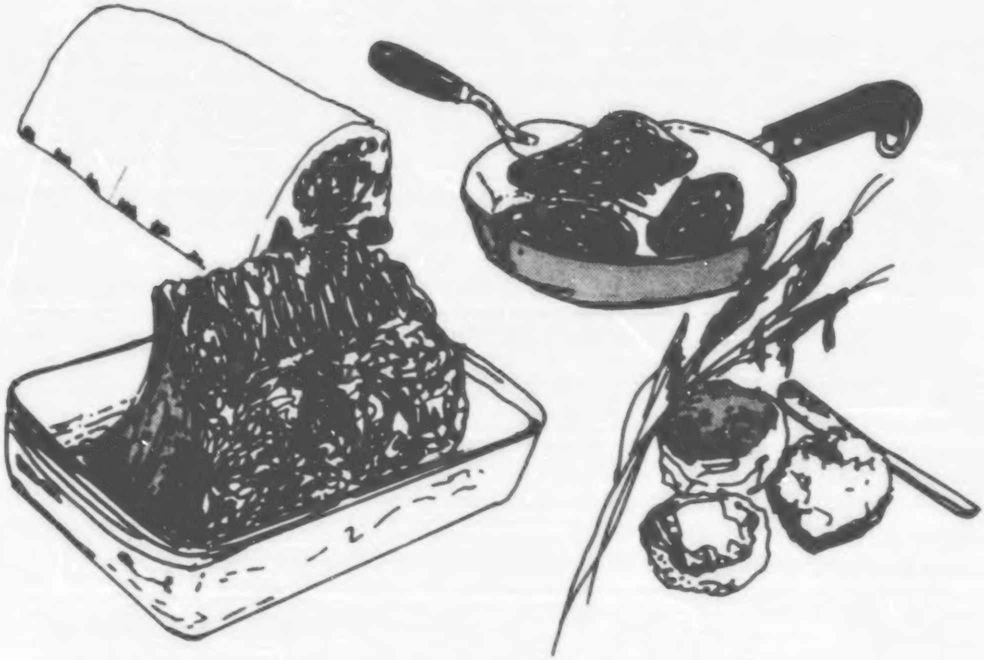
Thiamin
(B_1)

Functions

Necessary for healthy nerves; promotes good appetite and digestion; aids in enzyme action

Sources

Lean pork, organ meats, other meats, whole-grain or enriched breads and cereals



Riboflavin

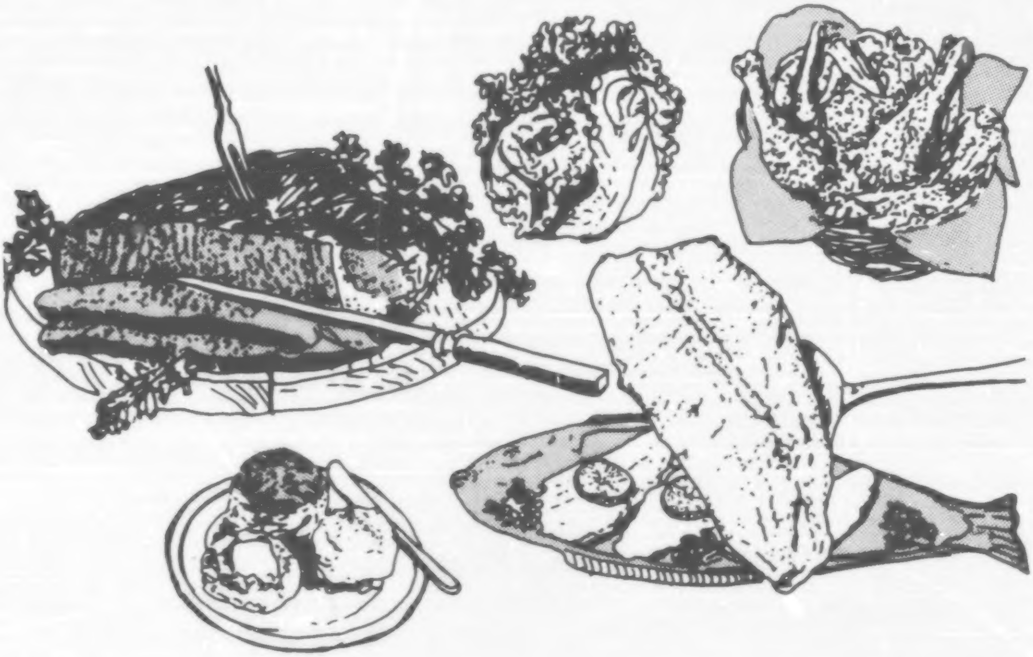
(B_2)

Functions

Necessary for healthy skin, mouth, eyes; helps cells use oxygen to release energy from food

Sources

Meats, fish, poultry, organ meats, dairy products, dark green leafy vegetables, whole-grain or enriched breads and cereals



FSS - 33-B

Niacin

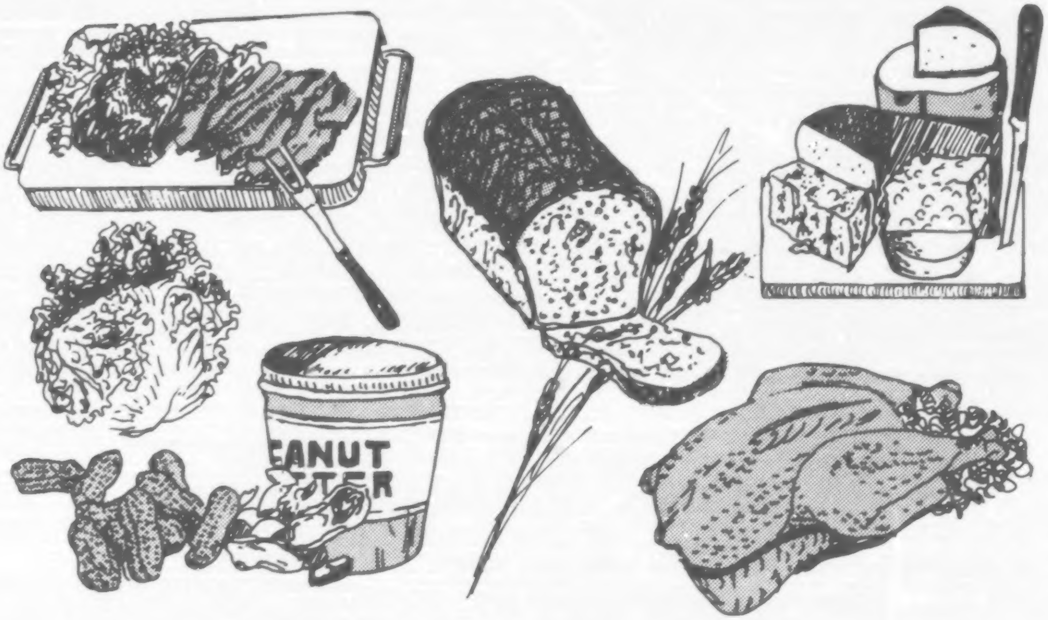
(B_3)

Functions

Necessary for healthy nervous system, normal digestion, healthy skin, and proper enzyme action in helping cells release energy from food

Sources

Meats, fish, poultry, dairy products, peanut butter, dark green leafy vegetables, whole-grain or enriched breads and cereals



TM # 5

B$_6$

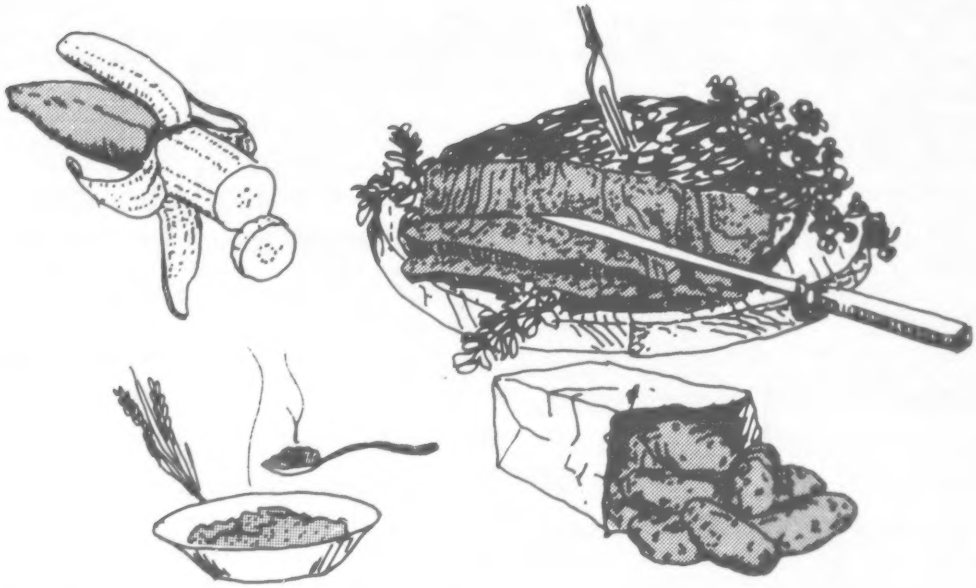
(Pyridoxine)

Functions

Closely related to protein metabolism (participates in conversion of tryptophan to niacin)

Sources

Meats, whole-grain cereals, bananas, potatoes



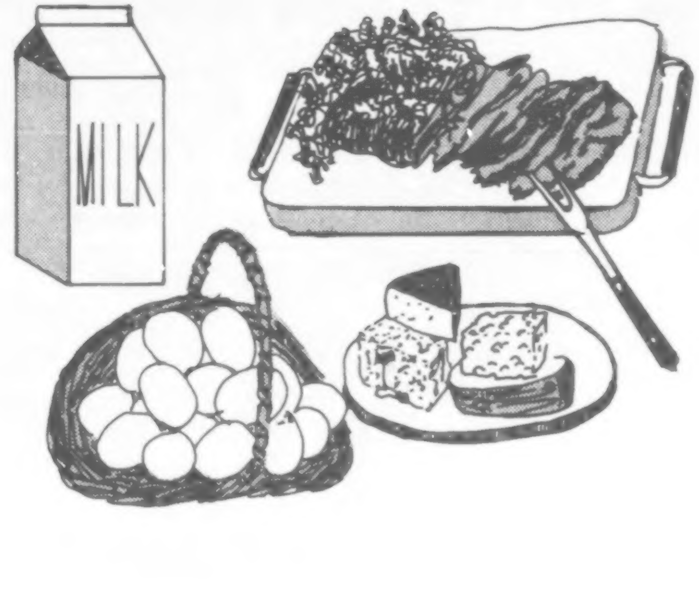
B 12
(Cobalamin)

Functions

Necessary for formation of mature red blood cells; important for healthy nervous system and digestive tract

Sources

Animal sources, such as meats, eggs, milk, cheese



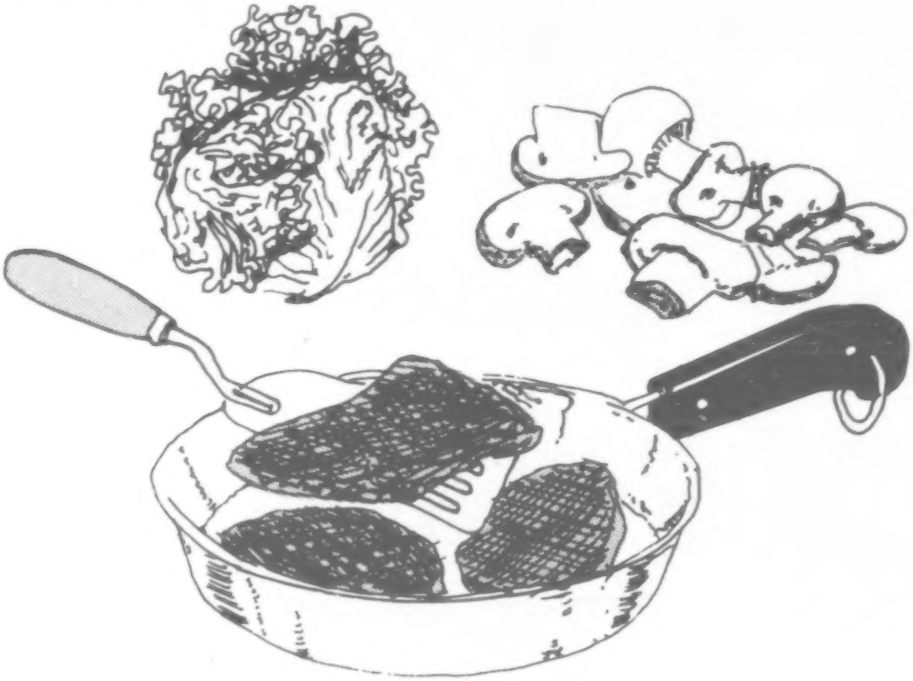
Folacin
(Folic Acid)

Functions

Vital to the synthesis of numerous compounds in the body; necessary for cell growth and reproduction, amino acid synthesis, and metabolism

Sources

Dark green leafy vegetables (losses during preparation can be as high as 90%), liver, mushrooms



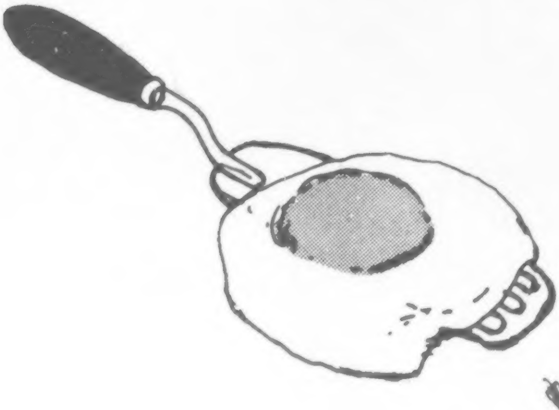
Biotin

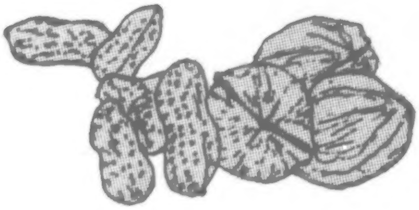
Functions

Essential for release of energy from carbohydrates, synthesis of fatty acids, and metabolism of amino acids

Sources

Egg yolks, milk, organ meats, whole-grain or enriched cereals, legumes, nuts





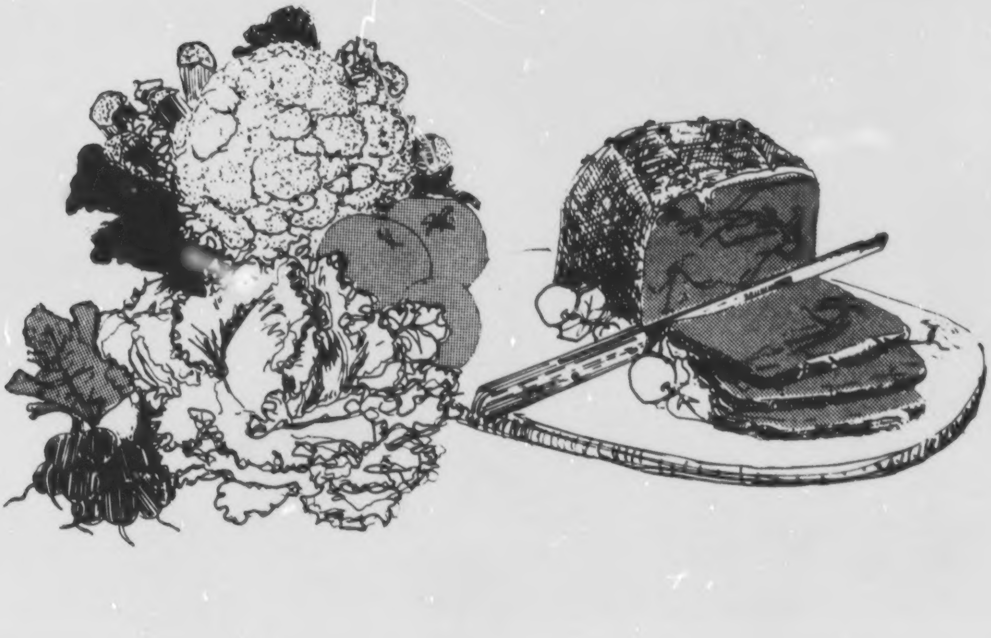
Pantothenic Acid

Functions

Essential for release of energy from carbohydrates, fats, proteins

Sources

Sources very numerous; organ meats; whole-grain cereals; found in most foods



Water Content of Foods

Foods	Percent Water
Milk	87%
Egg	74%
Well-done Meat	40%-50%
Medium to Rare Meat	50%-70%
Poultry	40%-50%
Fish	40%-50%
Hard Cheese	35%-40%
Fruits and Vegetables	70%-95%
Bread	35%
Dry Cereal, Crackers	3%-7%
Cooked Cereals	60%-86%
Nuts, Fats, Sweets	0%-10%

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

CLASS ASSIGNMENT SHEET #1 — CALCULATE CALORIES FROM GRAMS OF PROTEIN, FAT, AND CARBOHYDRATE

NAME ______________________________ SCORE ______________

Often substitutions must be made in menus for people on modified diets. To make these substitutions correctly, it is necessary to know how to calculate calories from grams of protein, fat, and carbohydrate. One gram of protein or carbohydrate will give 4 calories when metabolized in the body, but 1 gram of fat will give 9 calories. Using the example below as reference, calculate the calories of three forms of milk. Show your work.

EXAMPLE: ½ cup cottage cheese contains

20 grams protein	20 grams × 4 calories/gram =	80 calories
1 gram fat	1 gram × 9 calories/gram =	9 calories
2 grams carbohydrate	2 grams × 4 calories/gram =	8 calories
		97 Total calories

A. Calculate calories of 1 cup whole milk. Total calories = ____________

8 grams protein
10 grams fat
12 grams carbohydrate

B. Calculate calories of 1 cup 2% milk. Total calories = ____________

8 grams protein
5 grams fat
12 grams carbohydrates

C. Calculate calories of 1 cup skim milk. Total calories = ____________

8 grams protein
0 grams fat
12 grams carbohydrate

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

CLASS ASSIGNMENT SHEET #2 — DETERMINE CARBOHYDRATE, PROTEIN, AND FAT CONTENT OF ONE DAY'S INTAKE

NAME ______________________________ SCORE ______________

Carbohydrates, proteins, and fats are essential in a well-balanced diet. Using the form in Part I, write down all the foods and beverages that you consumed yesterday. Using the reference book recommended by your instructor, determine the grams of carbohydrates, proteins, and fats in your diet. Answer the questions in Part II and hand both sheets to your instructor.

EXAMPLE:

	CARBOHYDRATES (gm)	**PROTEINS (gm)**	**FATS (gm)**	**CALORIES**
BREAKFAST				
½ c unsweetened orange juice	15	0	0	60
1 egg, soft cooked	0	6	6	80
1 slice dry toast	14	3	1	65
SNACK				
1 medium apple	20	trace	1	80
LUNCH				
Chef salad:				
2 c chopped lettuce	4	trace	trace	10
½ tomato	3	trace	trace	13
1 oz cheddar cheese	trace	7	9	115
1 oz ham	0	5	5	65
2 Tbsp 1000 Island Dressing	4	trace	8	160
4 rye crackers	20	4	trace	90
1 cup low-fat milk (2%)	12	8	5	120
SNACK				
None	0	0	0	0
DINNER				
3 oz fried chicken	1	26	5	160
½ c mashed potatoes	13	2	5	98
2 stalks broccoli/1 tsp marg.	1	1	4	55
1 biscuit	15	2	3	90
1 tsp honey	5	trace	0	22
SNACK				
1 cup low-fat milk (2%)	12	8	5	120
2 chocolate chip cookies	12	6	1	103
TOTALS	151 gm	78 gm	58 gm	1506

(NOTE: *Nutritive Values of Food*, Home and Garden Bulletin No. 72, 1978, was used to determine the nutrient values in the example.)

CLASS ASSIGNMENT SHEET #2

PART I

	CHO (gm)	PRO (gm)	FAT (gm)	CALORIES
BREAKFAST				
SNACK				
LUNCH				
SNACK				
DINNER				
SNACK				
TOTALS				

CLASS ASSIGNMENT SHEET #2

PART II

A. What were the total grams of carbohydrates consumed? ____________________

B. What were the total grams of protein consumed? ____________________

C. What were the total grams of fats consumed? ____________________

D. What percentage of the total calories was derived from carbohydrates? __________

Proteins? ____________________ Fats? ____________________

EXAMPLE: The following example uses the figures from the example in Part I to show how to calculate percentage of calories from carbohydrate, protein, and fat.

Total calories consumed = 1506
Total grams of CHO consumed = 151
Total grams of Pro consumed = 78
Total grams of fat consumed = 58

To calculate percent of calories from carbohydrates, first convert grams of CHO to calories: 151 grams × 4 calories/gram = 604 calories; then use the following formula:

$$\frac{\text{Calories from CHO}}{\text{Total Calories}} \times 100 = \text{\% of calories from CHO}$$

$$\frac{604}{1506} \times 100 = 40\text{\% of calories from CHO}$$

To calculate percent of calories from proteins, first convert grams of Pro to calories: 78 grams × 4 calories/gram = 312 calories; then use the following formula:

$$\frac{\text{Calories from Pro}}{\text{Total Calories}} \times 100 = \text{\% of calories from protein}$$

$$\frac{312}{1506} \times 100 = 21\text{\% of calories from Pro}$$

To calculate percent of calories from fat, first convert grams of fat to calories: 58g × 9 calories/gram = 522 calories; then use the following formula:

$$\frac{\text{Calories from Fat}}{\text{Total Calories}} \times 100 = \text{\% of calories from fat}$$

$$\frac{522}{1506} \times 100 = 35\text{\% of calories from fat}$$

E. Do these percentages meet the recommended percentages needed in the daily diet?

____

CLASS ASSIGNMENT SHEET #2

F. What improvements could you make in your diet? ____________________

____

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G. Comments

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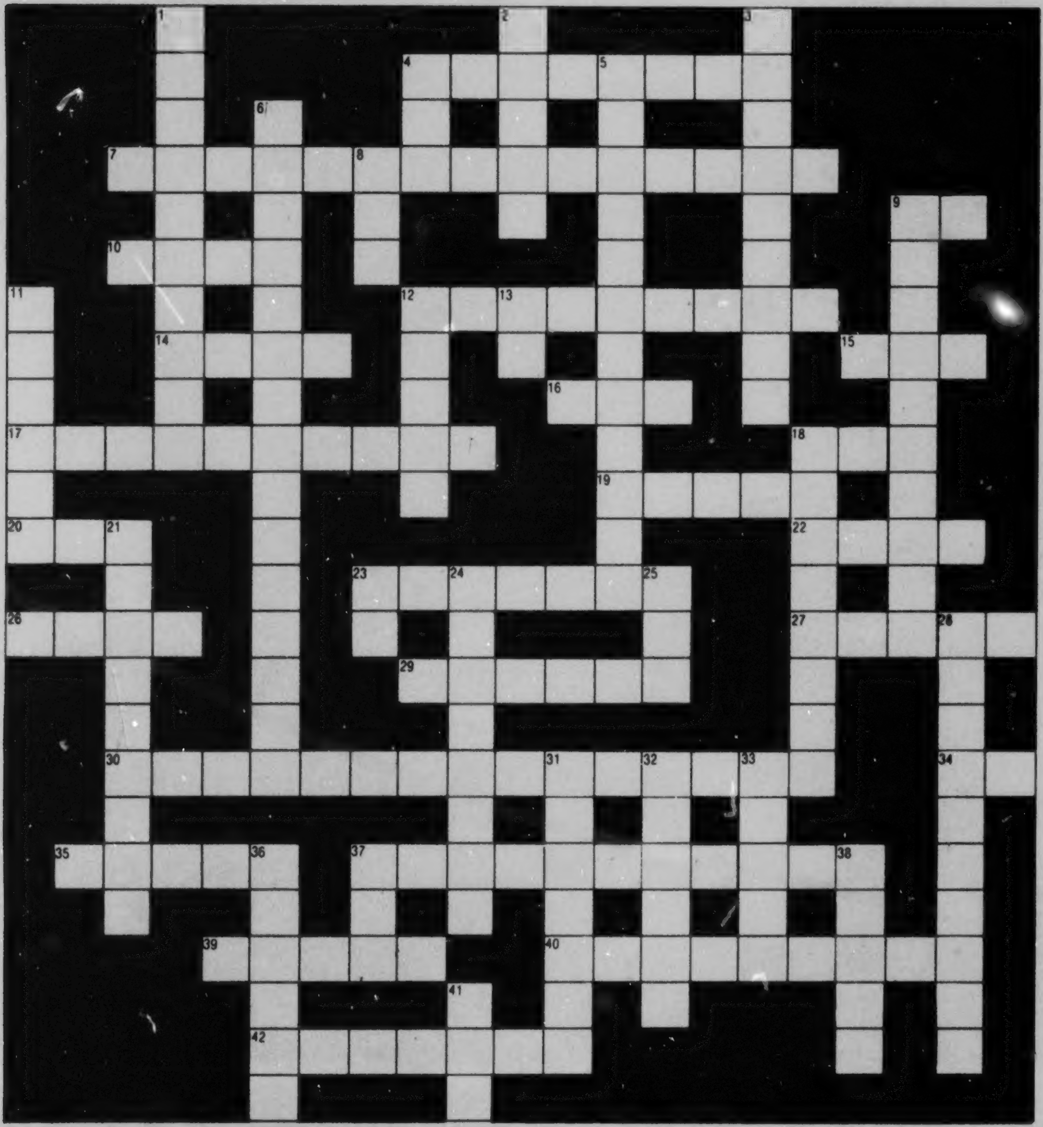
FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

CLASS ASSIGNMENT SHEET #3 — COMPLETE A NUTRIENT CROSSWORD PUZZLE

NAME ______________________________ SCORE ______________

Completing the crossword puzzle below will help you become familiar with the terms and definitions associated with nutrients. Use Section I of the Information Sheet and the clues on the following page to complete the puzzle below.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CLASS ASSIGNMENT SHEET #3

ACROSS

4. Complex carbohydrates
7. Type of fat molecule that has one double bond
9. Abbreviation for *milliliter*
10. Frolic
12. Formation of chemical compounds
14. Gets its strength from vitamin D
15. May be saturated, unsaturated, monosaturated
16. Recommended Dietary Allowances
17. Building blocks of proteins (2 wds)
18. Abbreviation for *carbohydrate*
19. Type of acid
20. International distress call
22. Chow—
23. Plants that belong to the pea family
26. Composed of fatty acids and glycerol (pl.)
27. Restrict
29. One of the essential amino acids
30. Function of normal metabolism necessary for health
34. Abbreviation for ounce
35. Colorful flower part
37. White, waxy substance related to fats
39. Type of products that includes butter, cheese, milk
40. Type of fat that cannot be seen with the eye
42. Living catalysts that speed up chemical reactions

DOWN

1. Iron-containing coloring material in red blood cells
2. Food made chiefly from flour and water
3. Amino and fatty acids that cannot be manufactured in the body
4. Sister's nickname
5. Large group of chemical substances containing carbon, hydrogen, and oxygen
6. Type of fat molecule that has two or more double bonds
8. "Squirrelly" source of protein
9. General term for all chemical changes that occur in nutrients after they have been absorbed by body to be used in cells
11. Simple carbohydrates
12. Examples are sesame, poppy, sunflower
13. Negative
18. Proteins containing all the essential amino acids to sustain life and growth
21. Fat molecule that cannot take up any hydrogen
23. Abbreviation for *pound*
24. Three-carbon alcohol
25. Look
28. Protein lacking sufficient quantity of one or more essential amino acids to fully sustain life and growth
31. Decrease in hemoglobin or red blood cells (pl.)
32. Appliance upon or in which to cook (2 wds)
33. Seed-holding centers of apples
36. Key nutrients
37. Automobile
38. Paper upon which nutrient values of containers' contents are listed
41. Basal metabolic rate

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

ANSWERS TO CLASS ASSIGNMENT SHEETS

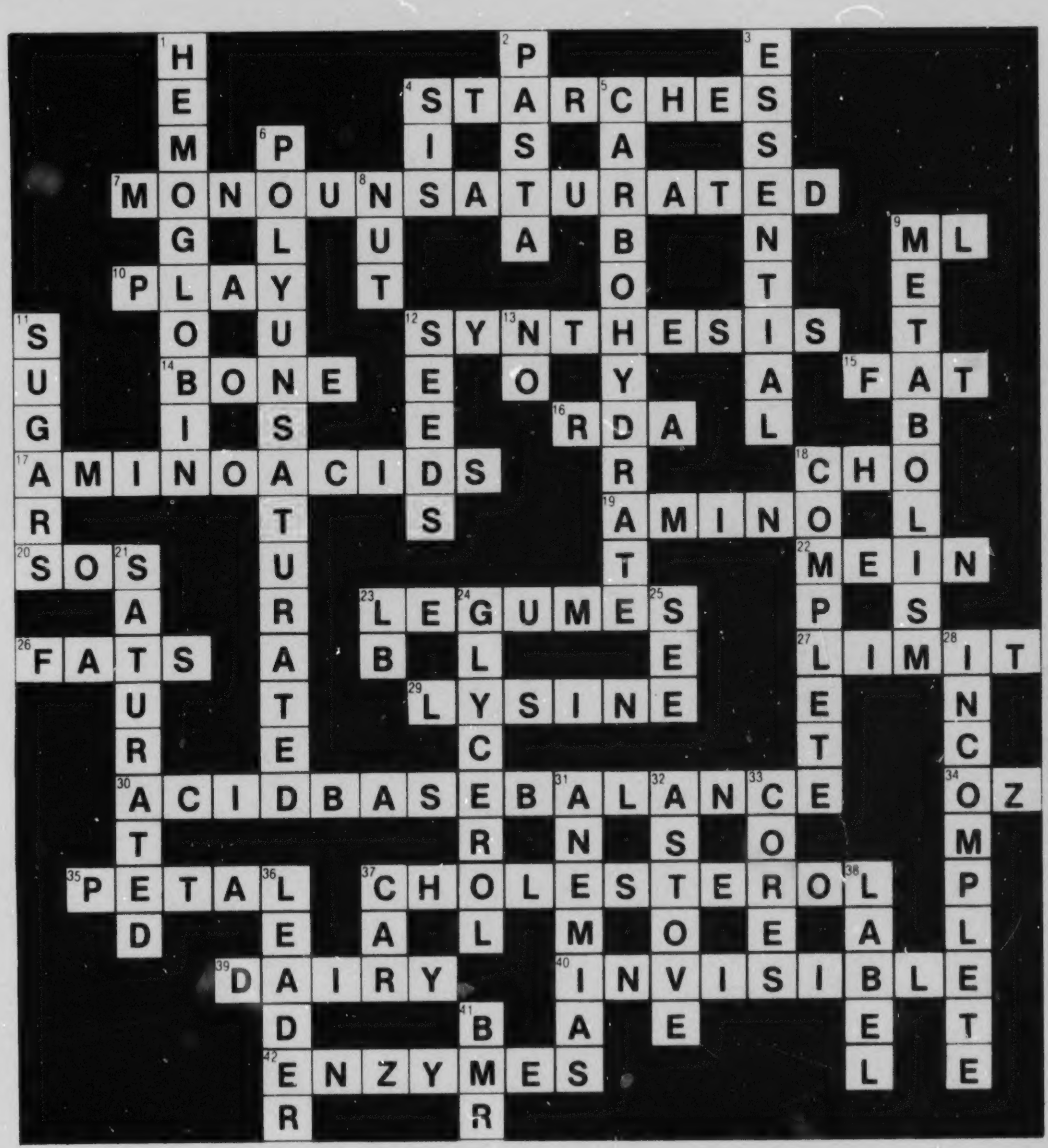
Class Assignment Sheet #1

A.	8 grams protein × 4 calories/gram	=	32	calories
	10 grams fat × 9		90	calories
	12 grams carbohydrate × 4		48	calories
			170	Total calories
B.	8 grams protein × 4	=	32	calories
	5 grams fat × 9		45	calories
	12 grams carbohydrates × 4		48	calories
			125	Total calories
C.	8 grams protein × 4	=	32	calories
	0 grams fat × 9		0	calories
	12 grams carbohydrate × 4		48	calories
			80	Total calories

Class Assignment Sheet #2 — Evaluated to the satisfaction of the class instructor

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #3


4 STARCHES
7 MONOUNSATURATED
9 ML
10 PLAY
12 SYNTHESIS
14 BONE
15 FAT
16 RDA
17 AMINOACIDS
18 CHO
19 AMINO
20 SOS
22 MEIN
23 LEGUMES
26 FATS
27 LIMIT
29 LYSINE
30 ACIDBASEBALANCE
34 OZ
35 PETAL
37 CHOLESTEROL
39 DAIRY
40 INVISIBLE
42 ENZYMES
1 HEMOGLOBIN
2 PASTA
3 ESSENTIAL
5 CARBOHYDRATE
6 POLYUNSATURATE
8 NUT
9 METABOLISM
11 SUGAR
12 SEEDS
13 NO
18 COMPLETE
21 SATURATED
23 LB
24 GLYCEROL
25 SEE
28 INCOMPLETE
31 ANEMIAS
32 STOVE
33 CORES
36 LEADER
38 LABEL
41 BMR

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

CLINICAL ASSIGNMENT SHEET #1 — IDENTIFY SOURCES OF VISIBLE AND INVISIBLE FAT IN DIET

NAME ______________________ SCORE ____________

Because fat is the most concentrated form of energy we eat, it is important to recognize the fat content of foods. One goal listed by the Senate Select Committee on Nutrition and Human Needs was to reduce overall fat consumption from approximately 40 percent to about 30 percent of energy intake. Identify the sources of visible and invisible fat in one day's menu at your facility. Write the foods in the appropriate column.

EXAMPLE:

Visible Fats	Invisible Fats
Margarine	Lowfat (2%) milk

Visible Fats	Invisible Fats

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

CLINICAL ASSIGNMENT SHEET #2 — EVALUATE DAY'S MENU FOR ADEQUACY OF IRON

NAME ______________________ SCORE ____________

Using foods from the Daily Food Guide and their recommended servings as a basic diet, it is evident that the adult male is supplied with sufficient iron. However, it is difficult to meet the recommended allowances for women and children unless fortified foods or dietary supplements are used. Using the following charts, evaluate the day's menu in Part I for adequacy of iron. Apply the information available in nutrition references at your facility to answer questions in Part II.

RECOMMENDED DIETARY ALLOWANCES FOR IRON	
Female, 11-50 years of age	18 mg daily
Boy, 11-18 years of age	18 mg daily
Child (male or female) 1-3 years of age	15 mg daily
Infant (male or female) 6-12 months of age	15 mg daily
Infant (male or female) 0-6 months of age	10 mg daily
Child (male or female) 4-10 years of age	10 mg daily
Woman, over 50 years of age	10 mg daily
Man, over 19 years of age	10 mg daily

APPROXIMATE IRON CONTENT OF COMMON FOODS	
Food	**Approximate Iron Content**
1 cup milk	0.1 mg
1 serving fruit	0.4 mg
1/2 cup potato or other vegetable	0.7 mg
1/2 cup leafy vegetable	1.1 mg
1 slice enriched bread	0.6 mg
1 slice whole-wheat bread	0.8 mg
1 cup enriched cereal	Varies from 0.4 to 12.3 mg
1 egg	1.1 mg
1 ounce meat, poultry, fish	0.9 mg

CLINICAL ASSIGNMENT SHEET #2

PART I

Sample menu

Breakfast

$^1/_2$ cup orange juice
1 egg
1 serving enriched oatmeal
1 slice toast
Margarine and jelly
1 cup milk
Coffee

Lunch

2 ounces chicken
$^1/_2$ cup mashed potato
$^1/_2$ cup mixed greens
Waldorf salad
Roll with margarine
2 sugar cookies
Iced tea

Supper

2 ounces hamburger meat on hamburger bun with lettuce, tomato, dill pickle, onion
French fries
Milkshake

A. Under each food group, list the individual foods from the sample menu that belong in that group. Beside each food, list the approximate milligrams of iron provided by that food. Use the figures in the chart "Approximate Iron Content of Common Foods."

(NOTE: You may use available references to look up enriched oatmeal, lettuce, cookies, etc.)

1. MILK AND DAIRY	APPROXIMATE mg OF IRON

CLINICAL ASSIGNMENT SHEET #2

2. **MEAT** **APPROXIMATE mg OF IRON**

3. **FRUIT AND VEGETABLE** **APPROXIMATE mg OF IRON**

4. **BREAD AND CEREAL** **APPROXIMATE mg OF IRON**

B. Estimated iron intake for the day ____________________

CLINICAL ASSIGNMENT SHEET #2

PART II

A. Write a check in the blank before the following individuals who would not have met their daily allowance for iron with the menu from Part I.

_____ 1. Child, 1-3 years

_____ 2. Man, over 19

_____ 3. Boy, 11-18 years

_____ 4. Female, 11-50 years

B. Make recommendations to improve iron intake of those in Part II, A, whose daily allowance for iron was not met.

____

____

____

C. List some foods that are good sources of iron.

____

____

____

D. Read labels on available cereal boxes. List brands of cereals that are fortified with iron.

____

____

____

CLINICAL ASSIGNMENT SHEET #2

E. Comments

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

CLINICAL ASSIGNMENT SHEET #3 — EVALUATE DAY'S MENU FOR ADEQUACY OF CALCIUM FOR AN INDIVIDUAL WHO DOES NOT DRINK MILK

NAME ______________________ SCORE ______________

Some individuals do not drink milk but can tolerate dairy products in their diet. Since calcium is one of the minerals most likely to be deficient in the American diet, it is necessary to understand calcium equivalents in the milk group. The following dairy products, in the amounts indicated, have calcium equivalent to that in 1 cup of milk. Using the chart below, evaluate the day's menu in Part I for adequacy of calcium. Apply the information available in nutrition references at your facility to answer questions in Part II.

Dairy Products — Amount equivalent in calcium to 1 cup milk

1 cup plain yogurt	2 ounces processed cheese food
1 1/2 cups ice cream	1/4 cup cheese spread
1 1/3 cups cottage cheese	1/4 cup Parmesan cheese
1 1/3 ounces Cheddar cheese	2 cups cream cheese

(NOTE: These foods contain about the same amount of calcium as 1 cup of milk, but varying amounts of protein and calories.)

EXAMPLE: 1/3 cup cottage cheese = 1/4 calcium equivalent

PART I

Breakfast

1/2 cup grapefruit juice
1 egg
1 serving cereal
1 slice toast
Margarine and jelly
1/2 cup milk for cereal
Coffee

A. ____________________ = Calcium equivalent

CLINICAL ASSIGNMENT SHEET #3

Lunch

2 ounces chicken
½ cup corn
½ cup broccoli
Pear half with ⅓ cup cottage cheese
Roll with margarine
½ cup ice cream
Vanilla wafers
Iced tea

B. ____________________ = Calcium equivalent

Supper

Sandwich with 1 ounce ham and
  1 ounce cheese
Sliced tomatoes
Lettuce
Apple

C. ____________________ = Calcium equivalent

D. Did this individual meet the calcium equivalent of 2 cups milk?

____

PART II

A. How can this individual increase his or her calcium intake?

____

____

B. List some foods that are good sources of calcium when milk and dairy products are not tolerated.

____

____

CLINICAL ASSIGNMENT SHEET #3

C. Comments

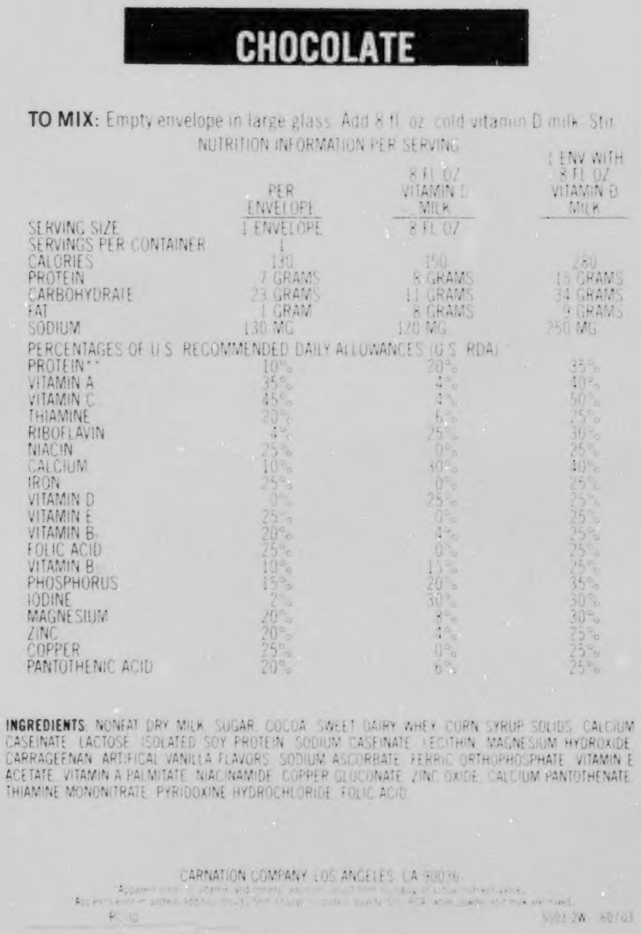
FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

CLINICAL ASSIGNMENT SHEET #4 — EVALUATE A FOOD PRODUCT LABEL

NAME ______________________________ SCORE ____________

There is a great deal of research and discussion going on about food products. Many people are interested in learning more about the foods they eat. Do you read labels before you purchase foods or prepare them? Take a food product from your cabinet that has more than three ingredients. Remove the label, tape it to the next page, and answer the questions that follow. Discuss your findings in class, or hand your answers to your instructor for evaluation.

EXAMPLE: Carnation Instant Breakfast label



CHOCOLATE

TO MIX: Empty envelope in large glass. Add 8 fl. oz. cold vitamin D milk. Stir.

NUTRITION INFORMATION PER SERVING

	PER ENVELOPE	8 FL OZ VITAMIN D MILK	1 ENV WITH 8 FL OZ VITAMIN D MILK
SERVING SIZE	1 ENVELOPE	8 FL OZ	
SERVINGS PER CONTAINER	1		
CALORIES	130	150	280
PROTEIN	7 GRAMS	8 GRAMS	15 GRAMS
CARBOHYDRATE	23 GRAMS	11 GRAMS	34 GRAMS
FAT	1 GRAM	8 GRAMS	9 GRAMS
SODIUM	130 MG	120 MG	250 MG
PERCENTAGES OF U.S. RECOMMENDED DAILY ALLOWANCES (U.S. RDA)*			
PROTEIN**	10%	20%	35%
VITAMIN A	35%	4%	40%
VITAMIN C	45%	4%	50%
THIAMINE	20%	6%	25%
RIBOFLAVIN	4%	25%	30%
NIACIN	25%	0%	25%
CALCIUM	10%	30%	40%
IRON	25%	0%	25%
VITAMIN D	0%	25%	25%
VITAMIN E	25%	0%	25%
VITAMIN B	20%	4%	25%
FOLIC ACID	25%	0%	25%
VITAMIN B	10%	15%	25%
PHOSPHORUS	15%	20%	35%
IODINE	2%	30%	30%
MAGNESIUM	20%	8%	30%
ZINC	20%	4%	25%
COPPER	25%	0%	25%
PANTOTHENIC ACID	20%	6%	25%

INGREDIENTS: NONFAT DRY MILK, SUGAR, COCOA, SWEET DAIRY WHEY, CORN SYRUP SOLIDS, CALCIUM CASEINATE, LACTOSE, ISOLATED SOY PROTEIN, SODIUM CASEINATE, LECITHIN, MAGNESIUM HYDROXIDE, CARRAGEENAN, ARTIFICAL VANILLA FLAVORS, SODIUM ASCORBATE, FERRIC ORTHOPHOSPHATE, VITAMIN E ACETATE, VITAMIN A PALMITATE, NIACINAMIDE, COPPER GLUCONATE, ZINC OXIDE, CALCIUM PANTOTHENATE, THIAMINE MONONITRATE, PYRIDOXINE HYDROCHLORIDE, FOLIC ACID.

CARNATION COMPANY, LOS ANGELES, CA 90036

Used with permission of the Carnation Company.

CLINICAL ASSIGNMENT SHEET #4

PART 1

A. Underline all B-complex vitamins listed as ingredients on label in example above.

B. Circle all mineral compounds listed as ingredients on label in example above.

PART II

A. Paste label here.

B. What is the main ingredient in your product?______________________________

____

(NOTE: The first ingredient listed is the main ingredient.)

CLINICAL ASSIGNMENT SHEET #4

C. If label lists nutrient percentages, list ingredients and percentage of each.

D. Do you feel that this is a nutritious product?

Why or why not?

E. List and define those ingredients that are not familiar to you.

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2

PART I

A.

1. **MILK AND DAIRY**	**APPROXIMATE mg OF IRON**
1 cup milk	0.1
Milkshake	0.1

2. **MEAT**	**APPROXIMATE mg OF IRON**
1 egg	1.1
2 ounces chicken	1.8
2 ounces hamburger	1.8

3. **FRUIT AND VEGETABLE**	**APPROXIMATE mg OF IRON**
½ cup orange juice	0.4
½ cup mashed potato	0.7
½ cup mixed greens	1.1
Waldorf salad	0.4
Lettuce, tomato, onion, and pickles	0.7
French fries	0.7

4. **BREAD AND CEREAL**	**APPROXIMATE mg OF IRON**
1 cup enriched oatmeal	1.4
1 slice enriched bread	0.6
1 roll	0.6
2 sugar cookies	0.6
1 bun (2 parts)	1.2

B. 13.3 mg

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

PART II

A. 1, 3, 4

B. Include cereal fortified with iron, whole wheat bread, and foods that are good sources of iron

C. Answer should include some of the following: liver, egg yolk, broccoli, dark green leafy vegetables, oysters, lean meat, molasses, dried fruits, whole-grain or enriched bread and cereal if eaten in quantity

D. Examples include Raisin Bran, Shredded Wheat, Total, Rice Krispies, Special K, Product 19, Golden Grahams

Clinical Assignment Sheet #3

PART I

A. 1/2 cup milk = 1/2 calcium equivalent

B. 1/3 cup cottage cheese = approximately 1/4 calcium equivalent
1/2 cup ice cream = 1/3 calcium equivalent

C. 1 ounce cheese = 3/4 calcium equivalent

D. No

PART II

A. Increase servings of tolerated dairy products; include other good sources of calcium daily

B. Answer may include dark green leafy vegetables such as collards, mustard, turnip greens; additional sources are canned fish with bones; broccoli; cabbage; cauliflower; clams; oysters; dried beans and peas

Clincial Assignment Sheet #4

PART I

A. Underlined — Niacinamide, thiamin mononitrate, pyridoxine hydrochloride, folic acid

B. Circled — Calcium caseinate, magnesium hydroxide, sodium ascorbate, ferric orthophosphate, copper gluconate, zinc oxide, calcium pantothenate

PART II — Evaluated to the satisfaction of the clinical instructor

FSS - 77-B

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

TEST

NAME ______________________________ SCORE ______________

1. Match terms associated with basic nutrition to their correct definitions. Write the correct numbers in the blanks. Terms and definitions are continued on the next page.

______a. Fat molecule that cannot take up any hydrogen; abundant in animal fat; solid at room temperature

______b. Plants that belong to the pea family

______c. Chemical compounds containing carbon, hydrogen, oxygen, and nitrogen; essential to all living cells

______d. General term for all chemical changes that occur in nutrients after they have been absorbed by body to be used in cells

______e. Food made chiefly from flour and water

______f. Iron-containing coloring material in red blood cells

______g. Building blocks of proteins

______h. Function of normal metabolism necessary for health

______i. Unique, three-carbon alcohol; part of simple fats

______j. Chief form of carbohydrates in diet; also known as *complex carbohydrates*

______k. Fat that cannot be seen with eye

______l. Simple carbohydrates

______m. Chemical compound lacking sufficient quantity of one or more essential amino acids to sustain life and growth

______n. Decrease in amount of hemoglobin in blood and/or in number of red blood cells

1. Proteins
2. Invisible fat
3. Amino acids
4. Hemoglobin
5. Saturated fat
6. Incomplete protein
7. Glycerol
8. Acid-base balance
9. Metabolism
10. Anemia
11. Legumes
12. Pasta
13. Starches
14. Sugars

TEST

______o. Fatty acid that must be present in diet because it cannot be synthesized in body

______p. Substances formed by living cells that speed up chemical reactions; living catalysts

______q. Group of chemical substances composed of carbon, hydrogen, and oxygen but in different proportions than those in carbohydrates; constitute a much more concentrated form of food energy

______r. Amino acids that cannot be manufactured in the body; they must be present in the diet

______s. Fat molecule that has two or more double bonds; can take up hydrogen; found in vegetable oils; liquid at room temperature

______t. Chemical compound containing sufficient quantities of essential amino acids to sustain life and growth

______u. Formation of chemical compounds

______v. Fat that can be seen with eye

______w. Minimum amount of energy or number of calories needed to sustain life while body is at rest

______x. Large group of chemical substances containing elements carbon, hydrogen, and oxygen

______y. Levels of intake of essential nutrients considered to be adequate to meet known nutritional needs of practically all healthy persons in the United States

______z. Fat molecule that has one double bond; has no apparent effect on blood cholesterol level

______aa. Key nutrients; if diet is adequate in these nutrients, it is likely to be adequate in other nutrients

______bb. White, waxy substance related to fats but very different in chemical structure

15. Essential fatty acid
16. Visible fat
17. Essential amino acids
18. Complete protein
19. Monounsaturated fat
20. Fats
21. Synthesis
22. Basal metabolic rate (BMR)
23. Carbohydrates
24. Enzymes
25. Polyunsaturated fat
26. Cholesterol
27. Leader nutrients
28. Recommended Dietary Allowances (RDA)

TEST

2. Identify leader nutrients according to their functions. Write the correct names in the blanks.

Iodine
Vitamin A
Iron
Protein
Potassium
Phosphorus
Calcium
Carbohydrate
Vitamin C (Ascorbic acid)
Fat
Vitamin D
Water
Niacin (B_3)
Sodium
Thiamin (B_1)
Riboflavin (B_2)

LEADER NUTRIENTS	FUNCTIONS
a. ______________	Carries nutrients to body cells and waste products away from cells; helps regulate body processes such as digestion; aids in regulation of body temperature
b. ______________	Builds and repairs body tissues; regulates body functions; provides growth; supplies energy
c. ______________	Supplies energy for work activities; adds flavor and variety to diet; spares protein so that it can be used for body building and repair
d. ______________	Storage form for energy; supplies energy in compact form for activities; insulates body and helps maintain body temperature; carries fat-soluble vitamins
Vitamins e. ______________ f. ______________ g. ______________	Necessary for healthy skin and nerves; promotes good appetite and digestion; helps body cells obtain energy from food (enzyme action)
h. ______________	Helps vision in dim light; helps keep lining of mouth, nose, throat, and digestive tract healthy and resistant to infection
i. ______________	Necessary for strong bones and teeth; needed by body to use calcium and phosphorus
j. ______________	Acts as cement between cells and helps them work together; aids in resistance to infection; helps in healing of wounds

TEST

LEADER NUTRIENTS	FUNCTIONS
Minerals	
k. ______________	Helps maintain water balance of body; essential for body to make proteins; needed for transmission of nerve impulses and for proper muscle contraction
l. ______________	Necessary for development and functioning of thyroid gland; prevents goiter; regulates basal metabolic rate
m. ______________	Builds and repairs bones and teeth; controls clotting of blood; regulates activity of nerves, heart, and other muscles
n. ______________	Helps maintain water and acid-base balance of body; necessary for proper muscle contraction
o. ______________	Builds and repairs hemoglobin; helps cells use oxygen; necessary in release of energy
p. ______________	Associates with calcium in body to build and repair bones and teeth; necessary for foods to be used by the cells

3. Identify leader nutrients according to their sources. Write the correct names in the blanks.

Vitamin A
Iron
Protein
Potassium
Phosphorus
Calcium
Carbohydrate
Vitamin C (Ascorbic acid)
Fat
Vitamin D
Iodine
Water
Niacin (B_3)
Sodium
Thiamin (B_1)
Riboflavin (B_2)

LEADER NUTRIENTS	SOURCES
a. ______________	Milk, fruits, vegetables; found in most foods
b. ______________	Breads, cereals, fruits, starchy vegetables, any food containing flour or sugar, sugar, syrup, jelly
c. ______________	*Visible:* Butter, margarine, cooking oils, salad dressings *Invisible:* Meats, milk, cream, nuts, cheese
d. ______________	*Complete:* Meat, fish, poultry, eggs, cheese, milk *Incomplete:* Dried beans and peas, nuts, whole grain cereals

TEST

LEADER NUTRIENTS	SOURCES
Vitamins	
e. ______________	Lean pork, organ meats, other meats, whole or enriched grains in cereals or breads, eggs, dried beans and peas
f. ______________	Fortified milk, eggs, fish-liver oil, exposure to sunlight
g. ______________	Citrus fruits, tomatoes, raw cabbage, cantaloupe, strawberries, green peppers, whole potatoes cooked in skin
h. ______________	Meats, fish, poultry, organ meats, egg, dairy products, dark green leafy vegetables, enriched or whole-grain bread and cereal
i. ______________	Liver; egg yolk; fortified margarine; butter; whole milk; *deep yellow* fruits and vegetables, such as apricots, cantaloupe, carrots; *dark green* vegetables, such as broccoli, turnip greens, dark salad greens
j. ______________	Meats, fish, poultry, peanut butter, dairy products, dark green leafy vegetables, enriched or whole-grain bread and cereal
Minerals	
k. ______________	Salt, baking powder, baking soda, processed foods, meats, milk, breads, meat tenderizers, water softeners
l. ______________	Iodized salt, saltwater fish, shellfish
m. ______________	Liver, egg yolk, oysters, lean meat, molasses, dried fruits, broccoli, green leafy vegetables, whole-grain or enriched bread and cereal if eaten in quantity
n. ______________	Wide variety of foods such as milk, eggs, liver, dried beans and peas, nuts, cheese, whole-wheat products
o. ______________	Meats, potatoes, peanut butter, dried fruits, oranges, tomatoes, grapefruit, bananas
p. ______________	Milk and dairy products except butter and dark green leafy vegetables such as collards, mustard, turnip greens

4. Write abbreviations of leader nutrients.

a. Protein ______________________________

b. Carbohydrate __________________________

TEST

c. Calcium ______________________

d. Sodium ______________________

e. Potassium ______________________

f. Water ______________________

g. Iodine ______________________

h. Iron ______________________

i. Phosphorus ______________________

5. List three body functions that vitamins help regulate.

a. ______________________________________

b. ______________________________________

c. ______________________________________

6. Select from the following list the B-complex vitamins. Write an "X" in the blank before each correct answer.

_____a. Folacin (folic acid)

_____b. Pyridoxine (B_6)

_____c. Thiamin (B_1)

_____d. Ascorbic acid

_____e. Biotin

_____f. Riboflavin (B_2)

_____g. Niacin (B_3)

_____h. Ergocalciferol

_____i. Pantothenic acid

_____j. Magnesium

_____k. Cobalamin (B_{12})

_____l. Retinol

TEST

7. Match specific vitamins to results of their deficiencies. Write the correct numbers in the blanks.

______a. Beriberi, a condition characterized by disease of nerves, heart disease, and edema

______b. Rickets, a condition characterized by bowed legs, enlarged joints, and softened bones due to improper utilization of calcium and phosphorus

______c. Pellagra, a condition characterized by inflammation of skin, diarrhea, and mental changes including depression and confusion

______d. Night blindness, a condition characterized by difficulty adjusting vision from light to dark; lowered resistance to infection; and blindness if untreated

______e. Scruvy, a condition characterized by easy bruising and hemorrhaging of skin, loosening of teeth and bleeding of gums, and weakening of cartilages that support skeleton

______f. Redness and burning of eyes; extreme eye sensitivity to strong light; and cheilosis — cracking of skin at corners of lips

1. Vitamin A
2. Vitamin D
3. Vitamin C
4. Thiamin (B_1)
5. Riboflavin (B_2)
6. Niacin (B_3)

8. List three facts about vitamins and minerals in daily diet.

a. ____

b. ____

c. ____

TEST

9. Match minerals to their correct functions. Write the correct numbers in the blanks.

_____a. Is catalyst for formation of hemoglobin

_____b. Promotes normal growth and sexual maturation, normal sense of taste and smell, synthesis of proteins, and wound healing; used in body's production of insulin

_____c. Regulates nervous irritability and muscle contraction; alcoholism causes deficiency

_____d. Strengthens bones and teeth; increases resistance to dental caries; lessens incidence of osteoporosis

_____e. Aids in maturation of red blood cells

_____f. Contributes to the rigid structures of hair, nails, and skin; necessary in the structures of certain amino acids; essential component of the B-complex vitamins thiamin and biotin

1. Cobalt (component of vitamin B_{12})
2. Fluoride
3. Zinc
4. Magnesium
5. Copper
6. Sulfur

10. Match number of calories provided by one gram each of metabolized protein, fat, and carbohydrate to their correct sources. Write the correct numbers in the blanks. Answers may be used more than once.

_____a. Protein

_____b. Fat

_____c. Carbohydrate

1. 4 calories/gram
2. 9 calories/gram

11. List the percentages of total calories of proteins, fats, and carbohydrates recommended in the daily diet.

Proteins — ______________________________

Fats — ______________________________

Carbohydrates — ______________________________

TEST

12. Select from the following list possible effects of excessive carbohydrates in diet. Write an "X" in the blank before each correct answer.

_____a. Increased incidence of dental caries

_____b. Irritation of gastrointestinal tract

_____c. Decreased incidence of cellulite

_____d. Obesity

_____e. Depressed appetite

_____f. Blood disease

13. Select from the following list effects of excessive fats in diet. Write an "X" in the blank before each correct answer.

_____a. Increased energy

_____b. Increased muscle support

_____c. Obesity

_____d. Firm skin tone

_____e. Increased incidence of heart disease, diabetes mellitus, gallbladder disorders, renal disease, cerebral hemorrhage

_____f. Ketosis (unless adequate carbohydrates are present to oxidize fats)

14. List three disadvantages of food misinformation.

a. ____

b. ____

c. ____

15. Select from the following list popular myths used by food faddists. Write an "X" in the blank before each myth.

_____a. Chemical fertilizers are as safe and effective as organic fertilizers

_____b. Soil depletion causes malnutrition

_____c. Most disease is due to faulty diet

TEST

______d. Most foods available to consumers are overprocessed and nutritionally deficient

______e. Polluted air causes malnutrition

______f. Subclinical deficiencies are a constant danger

______g. Health foods are more economical

16. State the most effective means of preventing people from accepting false food claims.

____

(NOTE: Test questions 17-21 list the assignment sheets. These are an important part of this test. If they have not been completed, check with your instructor.)

17. Calculate calories from grams of protein, fat, and carbohydrate.
18. Determine carbohydrate, protein, and fat content of one day's intake.
19. Evaluate day's menu for adequacy of iron.
20. Evaluate day's menu for adequacy of calcium for an individual who does not drink milk.
21. Evaluate a food product label.

FUNCTIONS AND SOURCES OF NUTRIENTS
UNIT I

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 519. The point total for questions 1-16 is 254; the point total for questions 17-21 is 265.)

1. (56 points)

a.	5	h.	8	o.	15	v.	16
b.	11	i.	7	p.	24	w.	22
c.	1	j.	13	q.	20	x.	23
d.	9	k.	2	r.	17	y.	28
e.	12	l.	14	s.	25	z.	19
f.	4	m.	6	t.	18	aa.	27
g.	3	n.	10	u.	21	bb.	26

2. (32 points)

a. Water
b. Protein
c. Carbohydrate
d. Fat
e. Thiamin (B_1)
f. Riboflavin (B_2)
g. Niacin (B_3)

(NOTE: Answers for e, f, and g may be in any order.)

h. Vitamin A
i. Vitamin D
j. Vitamin C (ascorbic acid)
k. Potassium
l. Iodine
m. Calcium
n. Sodium
o. Iron
p. Phosphorus

ANSWERS TO TEST

3. (32 points)

a. Water
b. Carbohydrate
c. Fat
d. Protein
e. Thiamin (B_1)
f. Vitamin D
g. Vitamin C (ascorbic acid)
h. Riboflavin (B_2)
i. Vitamin A
j. Niacin (B_3)
k. Sodium
l. Iodine
m. Iron
n. Phosphorus
o. Potassium
p. Calcium

4. (9 points)

a. Pro
b. CHO
c. Ca
d. Na
e. K
f. H_2O
g. I
h. Fe
i. P

5. (3 points)

Answer should include any three of the following

a. Digestion
b. Cell metabolism
c. Growth and development
d. Reproduction
e. General good health
f. Appetite
g. Resistance to illness

ANSWERS TO TEST

6. (24 points)

a, b, c, e, f, g, i, k

7. (12 points)

a.	4	d.	1
b.	2	e.	3
c.	6	f.	5

8. (9 points)

Answer should include any three of the following

a. Have no caloric value

b. Regulate metabolism

c. Are essential to life

d. Are obtained in sufficient quantities for most people by eating a varied, well-balanced diet that includes those foods in the Daily Food Guide.

9. (12 points)

a.	5	d.	2
b.	3	e.	1
c.	4	f.	6

10. (6 points)

a.	1
b.	2
c.	1

11. (9 points)

a. Proteins — 10 to 15 percent

b. Fats — 25 to 30 percent

c. Carbohydrates — 40 to 55 percent

ANSWERS TO TEST

12. (12 points)

    a, b, d, e

13. (12 points)

    c, e, f

14. (9 points)

    Answers should include any three of the following

    a. Faddism appeals to emotions and thrives where there is lack of knowledge

    b. Fake diagnostic machines, health foods, pills to cure diseases, and other products waste billions of dollars each year

    c. Claims for guaranteed results by health quacks cause many to postpone obtaining needed medical help

    d. May lead to increased expenditure of money for a nutritionally poor diet

    e. Bizarre weight reduction plans may seriously alter body metabolism

    f. Overuse or misuse of vitamins and/or minerals may alter body metabolism

15. (14 points)

    b, c, d, f

16. (3 points)

    Nutrition education

17. Evaluated to the satisfaction of the class instructor (30 points)

18. Evaluated to the satisfaction of the class instructor (100 points)

19. Evaluated to the satisfaction of the clinical instructor (50 points)

20. Evaluated to the satisfaction of the class instructor (50 points)

21. Evaluated to the satisfaction of the class instructor (35 points)

DIGESTION AND ABSORPTION
UNIT II

UNIT OBJECTIVE

After completing this unit, the student should be able to apply knowledge of the processes of digestion and absorption of food in providing nutritional care. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with digestion and absorption to their correct definitions.
2. Identify parts of the body involved in digestion.
3. Match major digestive organs to their correct functions.
4. Identify the liver, pancreas, and related structures.
5. Distinguish among functions of liver, gallbladder, and pancreas.
6. State factors that influence the rate of digestion.
7. Distinguish between mechanical and chemical digestion.
8. State role of stomach, small intestine, and large intestine in process of absorption.
9. List nutrients that can be directly absorbed into circulatory system without digestion.
10. Match nutrients to their digested products.
11. Distinguish among factors that improve or impair iron absorption.
12. List physical symptoms of malabsorption.
13. Select from a list causes of malabsorption.
14. Match terms associated with metabolism to their correct definitions.
15. List in order the major physiological processes in utilization of food by the body.
16. Describe the digestive process from ingestion through excretion.
17. Make recommendations to improve the nutritional status of patients with impaired food intake, digestion, or absorption.

DIGESTION AND ABSORPTION
UNIT II

SUGGESTED ACTIVITIES

I. Suggested activities

A. Order materials to supplement unit.

1. Booklet--*How Your Body Uses Food.* Available from the National Dairy Council, 6300 North River Road, Rosemont, Illinois 60018.

2. Films

a. *How a Hamburger Turns into You.* Color, 20 minutes, Henk Newenhouse, n.d. Available from Association Films, Inc., 600 Grand Avenue, Richfield, New Jersey 07657.

(NOTE: This film is highly recommended. It depicts digestion and metabolism in an understandable way. It explains how molecules of all nutrients are broken down to meet the body's needs. The film reminds us that our remarkable system for adapting food can work only if it is supplied with the proper raw materials.)

b. *Your Body for Life: Upper Level.* Kit of filmstrips and audio cassettes (2 each), plus transparencies and games, Tupperware Home Parties, n.d. Available from Tupperware Home Parties, Educational Services, Dept. EFC80, P. O. Box 2353, Orlando, Florida 32802.

(NOTE: This filmstrip explains the body systems and the way food provides necessary body nutrients.)

c. *Absorption (839).* Color, 16 mm, 20 minutes, Norwich-Eaton Pharmaceuticals, n.d. Available from Norwich-Eaton Pharmaceuticals, Norwich, New York 13815.

(NOTE: This film is concerned with the mechanisms of intestinal absorption in general, methods of studying absorptions, and some details of electrolyte, water, protein, and carbohydrate absorption.)

d. *I Am Joe's Stomach.* Color, 25 minutes, Reader's Digest, n.d. Available from Pyramid, Box 1948, Santa Monica, California 90406.

(NOTE: Live-action sequences and three-dimensional animation illustrate what happens as a meal is digested and some 35 million glands in the stomach lining begin to work. The effects of overeating, stress, and too much medicine are also discussed.)

B. Make transparencies.

C. Provide students with objective sheet.

SUGGESTED ACTIVITIES

D. Discuss unit and specific objectives.

E. Provide students with information and assignment sheets.

F. Discuss information and assignment sheets.

G. Develop appropriate learning activities for special needs students.

H. Partially blow up a round balloon. Squeeze it in various ways to demonstrate the mechanical action of the stomach in digestion.

I. Obtain a piece of twine 25 to 30 feet long. Tie a ribbon around it at 20 to 25 feet, indicating the length of the small intestine when relaxed.

(NOTE: When muscles are contracted, the small intestine is only about 15 feet long. The last 5 to 6 feet of twine show the length of the large intestine. Have two students stretch string to its full length for illustration.)

J. Digestion includes the mechanical and chemical processes by which foods are broken down to their nutrients so that they may be absorbed into the circulatory system. Mechanical and chemical changes take place simultaneously on the carbohydrates, fats, and proteins in foods. Have students try the following experiments to demonstrate three basic digestive facts. Discuss with class comments concerning each experiment.

1. Food needs to be partially liquid before we can taste it. Hold a spoonful of ice cream in your mouth until it melts. *Do not* chew it. Notice when you can begin to taste it.
2. Chew a piece of bread very slowly. *Do not* swallow it until it tastes sweet. What is happening? Which enzyme is involved?
3. Carefully cut pieces of raw potato, raw onion, and raw turnip exactly the same size. Close your eyes, hold your nose, and have someone place one piece of food in your mouth at a time. Can you tell the difference in food without seeing and smelling? How important is the appearance of food to good digestion? How important is the smell of food to our appetite and food acceptance?
4. Fill a bowl with water. Add 1/4 cup cooking oil and try dissolving the oil in the water by stirring. What happens?
5. Add liquid detergent to bowl containing water and oil; stir. What happens?

   (NOTE: Bile, the *liquid crowbar*, acts like soap by breaking down fats into smaller pieces so that they can be carried in the bloodstream.)

K. Discuss how a person can digest fats after the gallbladder has been surgically removed.

L. Tell how a stone in the common duct can cause pancreatitis.

SUGGESTED ACTIVITIES

M. Give test.

N. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Transparency masters

1. TM #1--Parts of Body Involved in Digestion
2. TM #2--Liver, Pancreas, and Related Structures
3. TM #3--Small Intestine
4. TM #4--Small Intestine Lining
5. TM #5--Small Intestine Villi
6. TM #6--Small Intestine Microvilli

E. Class Assignment Sheet #1--Complete a Crossword Puzzle of Terms Related to Digestion and Absorption

F. Answers to class assigment sheet

G. Clinical assignment sheets

1. Clinical Assignment Sheet #1--Describe the Digestive Process from Ingestion Through Excretion
2. Clinical Assignment Sheet #2--Make Recommendations to Improve the Nutritional Status of Patients with Impaired Food Intake, Digestion, or Absorption

H. Answers to clinical assignment sheets

I. Test

J. Answers to test

III. Unit references

A. Lewis, Clara M. *Basics of Nutrition.* Philadelphia: F.A. Davis Co., 1976.

B. McNutt, Kristen W., and David R. McNutt. *Nutrition and Food Choices.* Chicago: Science Research Associates, Inc., 1978.

SUGGESTED ACTIVITIES

C. Mitchell, Helen S., et al. *Nutrition in Health and Disease,* 16th ed. Philadelphia: J. B. Lippincott Co., 1976.

D. Robinson, Corrine H. *Basic Nutrition and Diet Therapy,* 4th ed. New York: MacMillan Publishing Company, Inc., 1980.

E. Rogers, Helen V., and Ann Benson. *Practical Nursing I,* rev. by Jamee Reid-Sloan. Stillwater, Oklahoma: State Department of Vocational and Technical Education/Curriculum and Instructional Materials Center, 1981.

F. Stare, Frederick J., and Margaret McWilliams. *Living Nutrition,* 3rd ed. New York: John Wiley and Sons, 1981.

DIGESTION AND ABSORPTION
UNIT II

INFORMATION SHEET

I. Terms and definitions (Class Assignment Sheet #1)

A. Ingestion--Eating; taking food into body for digestion

B. Digestion--Process by which foods are broken down to their nutrients so that they may be absorbed by body (Transparency #1)

C. Mechanical action of digestion--Changing physical state of food by reducing to small particles (Clinical Assignment Sheet #1)

D. Chemical action of digestion--Breaking down nutrients in food by enzyme action (Clinical Assignment Sheet #1)

E. Enzyme--Substance that speeds up specific breakdown of material; especially important in digestion and utilization of food by body

(NOTE: Enzymes cause chemical reactions without being used up in the process.)

F. Amylase--Any enzyme that helps change starch into sugar

G. Lipase--Any of a group of enzymes that helps change fats into fatty acids and glycerol

H. Insoluble--Substance that cannot be dissolved in a liquid

EXAMPLE: Fat in water

I. Emulsify--To disperse fine particles of insoluble material in liquid

EXAMPLE: Fat in blood after breakdown by bile

J. Bile--Yellow, greenish fluid secreted by liver to aid in breakdown of fats; sometimes called the *liquid crowbar* (Transparency #2)

K. Satiety--State of being satisfied; feeling full; having enough

L. Gastric juices--Digestive juices secreted by stomach

M. Chyme--Food that has been mixed with gastric juice until food is almost liquid

(NOTE: *Chyme* is pronounced "kime.")

N. Peristalsis--Peculiar, wavelike motion of intestines produced by contraction of muscular walls; moves food contents through intestines

O. Gastrointestinal tract (GI tract)--Muscular, mucosa-lined tube, approximately 30 feet long, which is divided into several sections, including the stomach, small intestine, and large intestine; commonly called the *digestive tract* (Transparency #1)

INFORMATION SHEET

P. Mucosa--Mucous membranes lubricated by secretions of cells and glands within the membrane itself

EXAMPLE: GI tract is lined with mucosa.

Q. Duodenum--First 10 inches of small intestine; site where most digestion is completed and most digestive hormones are made; part of intestine where little absorption takes place (Transparencies #1 and #3)

R. Jejunum--Seven feet of small intestine immediately following duodenum; part of intestine where most absorption takes place (Transparency #1)

S. Absorption--Uptake of nutrients by villi in walls of small intestine for transfer to circulatory system (Transparency #5)

T. Malabsorption--Inability to digest or absorb food in intestinal tract

U. Villus--Fingerlike projection that covers and gives velvety appearance to mucous membranes of small intestine; helps body absorb nutrients (Transparencies #3-#6)

(NOTE: The plural of villus is *villi*.)

V. Glycogen--Form in which carbohydrate is stored in body's tissue; also called *animal starch*

W. Antibody--Protein produced in the body usually in reaction to a specific foreign substance such as a bacterial infection

X. Hormones--Chemical substances secreted by glands to regulate functions of organs

(NOTE: An endocrine gland, such as the pancreas, secretes a specific chemical or hormone directly into the bloodstream.)

Y. Excretion--Elimination of body's waste products

Z. Glucose--Simple sugar

AA. Feces--Solid waste products excreted by the body

II. Parts of the body involved in digestion (Transparency #1)

A. Teeth

B. Mouth

C. Salivary glands

D. Esophagus

E. Stomach

INFORMATION SHEET

F. Gallbladder

G. Liver

H. Duodenum

I. Pancreas

J. Jejunum

K. Large intestine (colon)

L. Anus (rectum)

III. Functions of major digestive organs (Transparency #1; Clinical Assignment Sheet #1)

A. Mouth

1. Chews food into smaller particles

   (NOTE: Ill-fitting dentures can interfere with the digestive process.)

2. Mixes food with saliva

   (NOTE: Saliva is necessary both for swallowing and digestion. Two quarts of saliva are secreted daily. An enzyme in the saliva [*ptyalin*] converts starch into various sugars.)

B. Esophagus

1. Serves as a tubular passageway for food from mouth to stomach

   (NOTE: Heartburn is caused by hydrochloric acid in the esophagus, *not* by too much hydrochloric acid in the stomach, as is commonly thought.)

2. Secretes mucus to aid in food movement

   (NOTE: The esophagus does not secrete digestive enzymes.)

C. Stomach

1. Serves as a reservoir for food for the three or four hours needed for proper mixing

   (NOTE: The stomach can hold approximately 1/2 gallon at a time.)

2. Prepares food for digestion by changing it from a solid to a semifluid material (chyme) by peristalsis

3. Begins digestion of proteins

4. Secretes 2 to 3 quarts of gastric juices daily

INFORMATION SHEET

D. Small intestine

(NOTE: The small intestine is approximately 1 inch in diameter, is 20 feet in length, and is divided into the duodenum, jejunum, and the ileum.)

1. Receives digestive juice from the pancreas and bile from the liver

   (NOTE: This process occurs in the duodenum.)

2. Secretes intestinal juices

   (NOTE: Specific stimulants that cause the duodenum to secrete digestive juices are proteins, chyme, alcohol, caffeine, and fats.)

3. Digests and absorbs greater part of food

   (NOTE: The inside intestinal wall is made up of villi and microvilli, which greatly increase surface area. [See Transparencies #5 and #6.] If all villi and microvilli were stretched out flat, they would cover a tennis court.)

E. Large intestine (colon)

(NOTE: The large intestine is approximately 5 feet long and 3 inches in diameter.)

1. Reabsorbs water, mineral salts, and vitamins

2. Provides a site for bacteria that produce vitamin K and other bacteria that aid in absorption

3. Secretes mucus to aid in movement of feces

   (NOTE: The large intestine secretes no digestive enzymes.)

IV. Liver, pancreas, and related structures (Transparency #2)

A. Cystic duct

B. Gallbladder

C. Common bile duct

D. Duodenum

E. Liver

F. Hepatic duct

G. Pancreas

H. Pancreatic duct

INFORMATION SHEET

V. Functions of liver, gallbladder, and pancreas (Transparency #2)

A. Liver

(NOTE: The liver is the largest organ in the body. It weighs approximately 3 pounds and is made up of two major lobes. It lies on the right side, directly under the diaphragm.)

1. Metabolizes carbohydrates, fats, and proteins

2. Manufactures blood proteins and over one thousand enzymes

3. Manufactures cholesterol

4. Manufactures approximately 1 quart of bile daily, aiding in the metabolism of fats

   (NOTE: Bile is made of cholesterol, broken-down products of hemoglobin and red blood cells, and bile salts.)

5. Removes toxins, bacteria, and worn-out blood cells

6. Stores vitamins A, D, K, and B_{12}

7. Stores simple sugars such as glycogen

   (NOTE: The equivalent of 1/2 pound of sugar is stored as glycogen. This is equivalent to half the body's daily need for glucose.)

8. Forms antibodies

B. Gallbladder--Stores bile until needed for digestion

(NOTE: Bile secreted by the liver is mostly water. This "thin" bile secreted by the liver is concentrated in the gallbladder.)

C. Pancreas

(NOTE: This gland is located behind the stomach and weighs approximately 3 ounces.)

1. Produces digestive juices (1 quart daily) that could probably adequately digest all foods if no other digestive juice were produced by the body

2. Produces insulin, a hormone that aids in carbohydrate metabolism

INFORMATION SHEET

VI. Factors that influence the rate of digestion (Clinical Assignment Sheet #2)

(NOTE: Total time from ingestion to excretion can vary from nine to forty-eight hours.)

A. Kinds of food eaten

EXAMPLE: Fats take longer to digest than most other foods; therefore, they have a high satiety value.

B. Amount of food eaten at one time

EXAMPLE: A large amount of food eaten at one time depresses the flow of gastric juice and slows digestion.

C. Psychological factors

EXAMPLE: Emotions such as anger, fear, or grief can cause the rhythmic motions of the GI tract to stop or become irregular.

D. Chewing technique

EXAMPLE: Foods that are poorly chewed, possibly from ill-fitting dentures, require a longer time for digestion than those that are properly chewed.

E. Individual variation in movement of the GI tract

F. Disorders of the GI tract

EXAMPLES: Diarrhea, lactose intolerance, pancreatitis, ulcers

VII. Mechanical and chemical digestion (Clinical Assignment Sheet #1)

A. Mechanical digestion

(NOTE: Mechanical digestion begins in the mouth with chewing and continues along the digestive tract with swallowing in the esophagus and peristalsis in the stomach and small intestine.)

1. Breaks food into smaller particles

   EXAMPLE: Chewing

2. Moistens and mixes food with digestive juices

3. Moves food along digestive tract

INFORMATION SHEET

4. Furnishes power needed by using muscles in tongue, jaw, throat, esophagus, stomach, and intestines

   (NOTE: The muscular action of peristalsis is so strong that food will continue through the digestive tract even when a person is doing a headstand.)

5. Breaks fat down with bile

   (NOTE: Technically, bile is not an enzyme, but it has been referred to as a *liquid crowbar* because its action breaks fat molecules into smaller pieces.)

B. Chemical digestion

(NOTE: The chemical acton of digestion requires enzymes to help it along. Enzymes are named for the substance upon which they act; for example, protease is an enzyme that digests protein.)

1. Changes carbohydrates to simple sugars in the mouth and small intestine
2. Changes proteins to amino acids in the stomach and small intestine
3. Changes fats to fatty acids and glycerol in the stomach and small intestine

EXAMPLE:

SPECIFIC ACTIONS OF ENZYMES

Enzyme	Source of enzyme	Food	Product
Ptyalin (amylase) (Carbohydrase)	Salivary glands	Starch	Complex sugar, maltose
Pepsin (protease)	Gastric mucosa	Protein	Smaller proteins
Lipase	Gastric mucosa	Fats	Smaller fats
Trypsin (protease)	Pancreas	Protein	Smaller proteins (polypeptides) and amino acids
Lipase	Pancreas and small intestine	Fats	Fatty acids and glycerol
Amylase	Pancreas and small intestine	Starch	Complex sugar, maltose
Sucrase	Small intestine	Sucrose	Glucose and fructose
Maltase	Small intestine	Maltose	Two glucose molecules
Lactase	Small intestine	Lactose	Glucose and galactose
Peptide	Small intestine	Polypeptides (smaller proteins)	Amino acids

INFORMATION SHEET

VIII. Role of stomach, small intestine, and large intestine in process of absorption (Transparencies #1-#6)

A. Stomach--Very limited absorption of water, glucose, alcohol, aspirin, and other drugs

B. Small intestine--Absorption through villi and microvilli of 90 percent of all nutrients

(NOTE: Each villi has five hundred microvilli, and there are four to five million villi in the small intestine.)

C. Large intestine--Very limited absorption, mainly of water

IX. Nutrients that can be directly absorbed into circulatory system without digestion

A. Water

B. Minerals

C. Vitamins

X. Nutrients and their digested products

A. Carbohydrates--Simple sugars

B. Proteins--Amino acids

(NOTE: Proteins are digested slowly because they are such large compounds. Some proteins contain five hundred amino acids.)

C. Fats--Fatty acids and glycerol

(NOTE: Fats with more than twelve carbons are absorbed through lymph vessels of villi. Other nutrients, and fats with less than twelve carbons, are absorbed into blood through capillaries of villi and microvilli. See Transparencies #5 and #6.)

XI. Factors that improve or impair iron absorption

(NOTE: People with adequate stores of iron absorb about 10 percent iron from diet.)

A. Improve absorption

1. Increased bodily need

2. Iron-containing foods from animal sources

(NOTE: Iron in meat, fish, and poultry is more readily absorbed than that in dairy products and egg yolk.)

3. Presence of foods containing vitamin C

INFORMATION SHEET

B. Impair absorption

1. Iron-containing foods from plant sources

(NOTE: Iron in wheat is poorly absorbed. The cellulose in vegetables and fruits diminishes iron absorption.)

2. Excessive use of soda or alkaline medications

EXAMPLE: Antacids

3. Excessive use of coffee, tea, or other high-caffeine beverages

XII. Physical symptoms of malabsorption

A. Weight loss

B. Diarrhea

C. Colonic pain

D. Abdominal distress

XIII. Causes of malabsorption

A. Insufficient enzyme activity such as pancreatitis

B. Insufficient bile acid activity such as gallstones or inflammation of gallbladder

C. Disease of small intestine, surgery, or radiation therapy

D. Cancer

E. Uncontrolled diabetes

F. Enzyme deficiency such as lactose deficiency

XIV. Terms associated with metabolism

(NOTE: Metabolism varies with age, body shape and size, sex, thyroid and adrenal gland function, and emotional stress.)

A. Anabolism--Process of building, maintaining, and repairing tissue

(NOTE: To help remember anabolism, think of "and" or adding.)

B. Catabolism--Process of breaking down complex substances into simpler ones

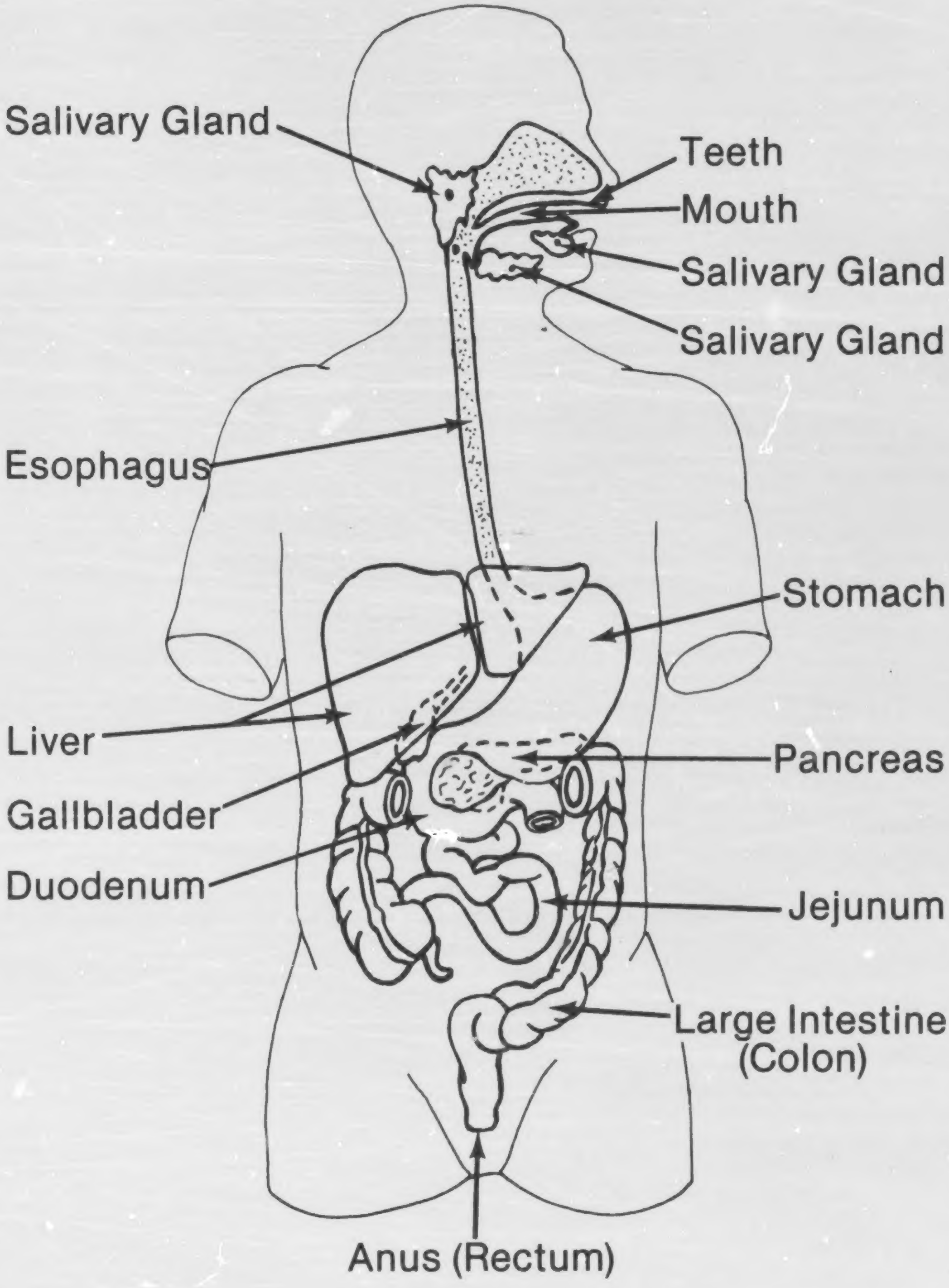
(NOTE: To help remember catabolism, think of "catastrophe" or breaking down.)

INFORMATION SHEET

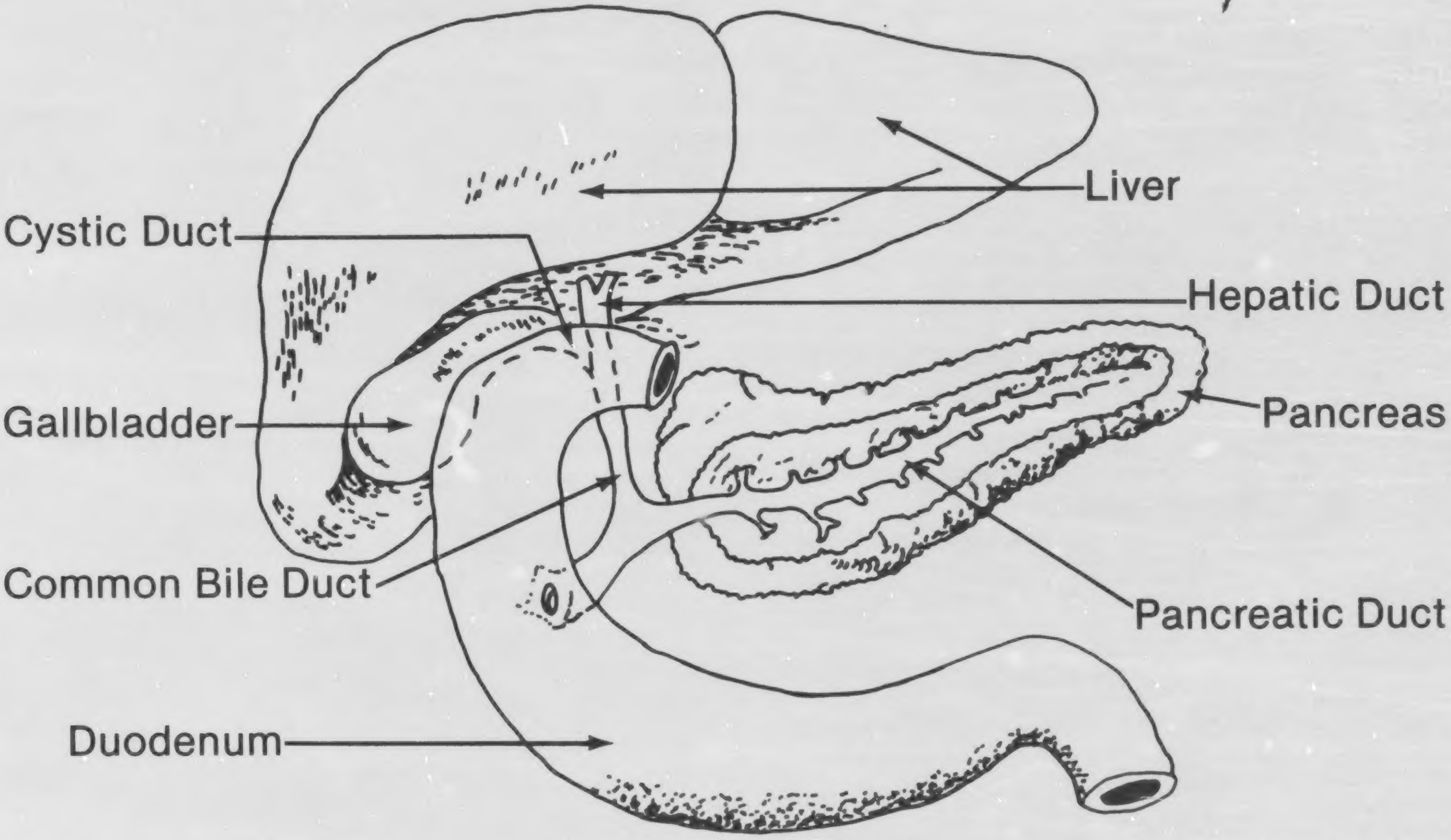
XV. Major physiological processes in utilization of food by the body

- A. Ingestion
- B. Digestion
- C. Absorption
- D. Circulation
- E. Metabolism
- F. Excretion

Parts of Body Involved in Digestion


Salivary Gland
Teeth
Mouth
Salivary Gland
Salivary Gland
Esophagus
Stomach
Liver
Pancreas
Gallbladder
Duodenum
Jejunum
Large Intestine (Colon)
Anus (Rectum)

Liver, Pancreas, and Related Structures


Liver
Cystic Duct
Hepatic Duct
Pancreas
Gallbladder
Common Bile Duct
Pancreatic Duct
Duodenum

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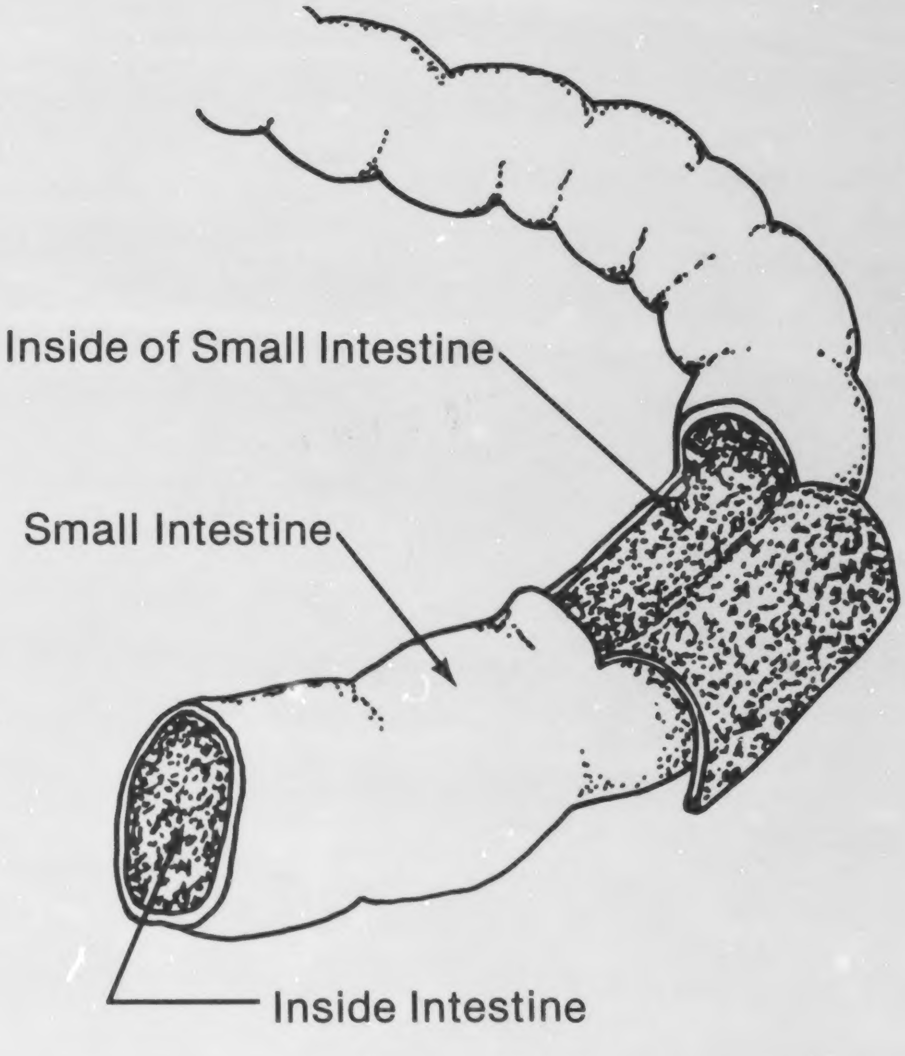
153

TM #2

FSS - 109-B

Small Intestine


Inside of Small Intestine
Small Intestine
Inside Intestine

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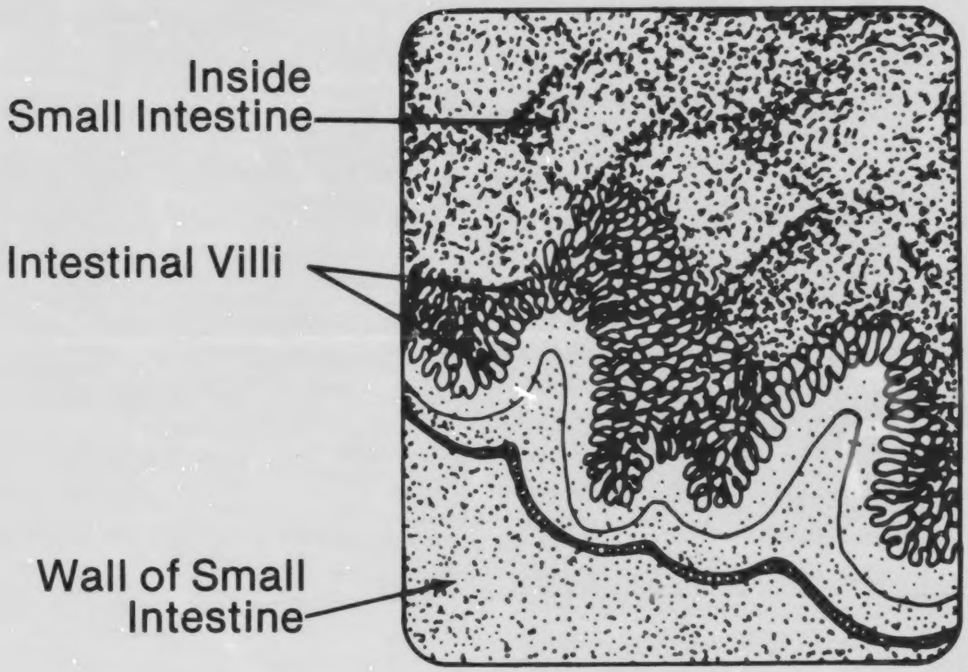
TM #3

Small Intestine Lining

First Magnification


Inside Small Intestine
Intestinal Villi
Wall of Small Intestine

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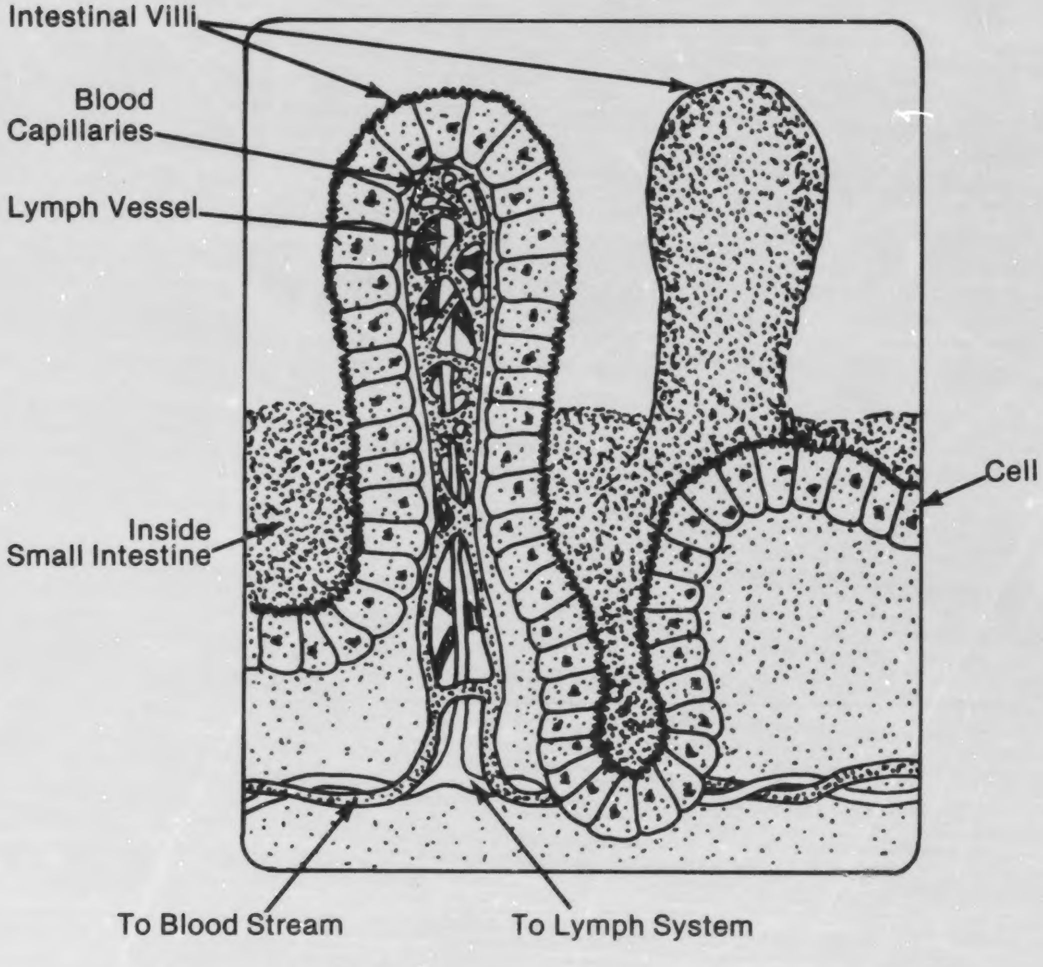
Small Intestine Villi

Second Magnification


Intestinal Villi
Blood Capillaries
Lymph Vessel
Inside Small Intestine
Cell
To Blood Stream
To Lymph System

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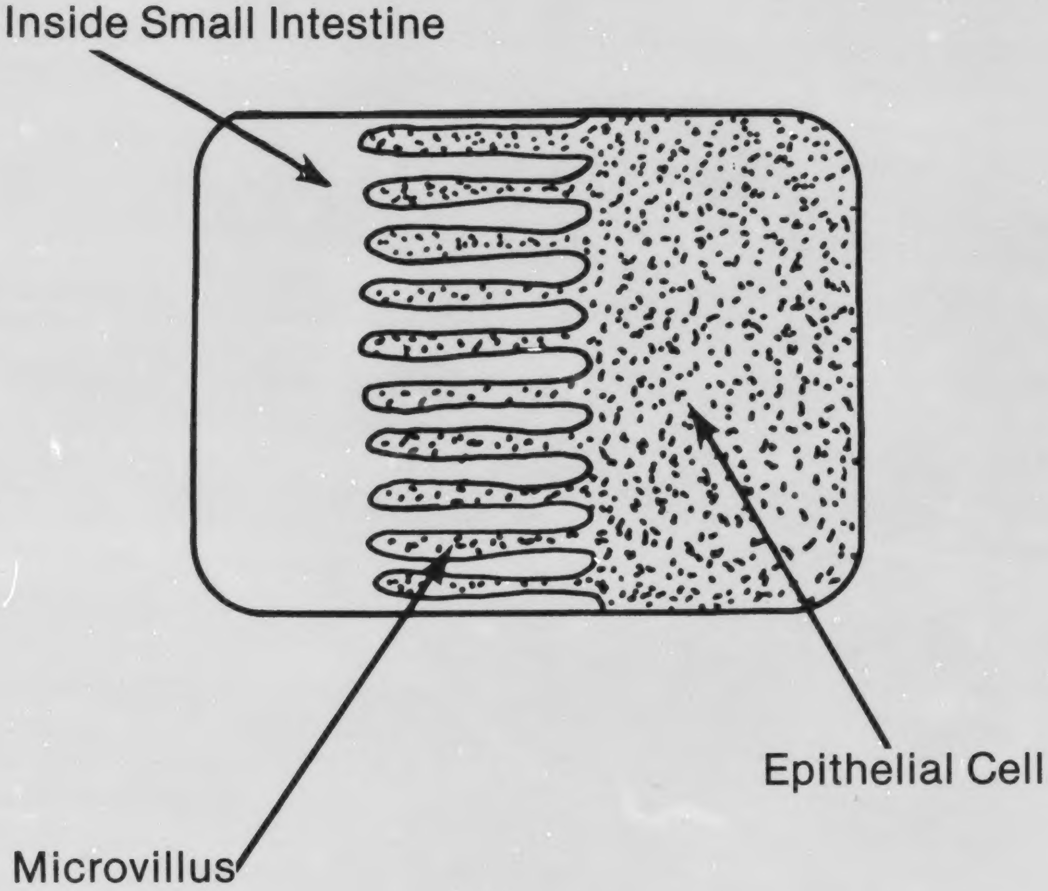
Small Intestine Microvilli

Third Magnification


Inside Small Intestine
Epithelial Cell
Microvillus

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DIGESTION AND ABSORPTION
UNIT II

CLASS ASSIGNMENT SHEET #1--COMPLETE A CROSSWORD PUZZLE ON TERMS RELATED TO DIGESTION AND ABSORPTION

NAME ______________________ SCORE ____________

To understand bodily processes, such as digestion and absorption, it is necessary to know the meanings of words used to describe the utilization of food. Using the following clues and your Information Sheet, complete the crossword puzzle on the following page.

ACROSS

1. Action of digestion breaking down nutrients in food by enzymes
3. Inability to digest or absorb food in intestinal tract
7. Any of a group of enzymes that helps change fats into fatty acids and glycerol
8. Form in which carbohydrate is stored in body's tissue; also called *animal starch*
9. Action of digestion changing physical state of food by reducing to small particles
11. Muscular, mucosa-lined tube, approximately 30 feet long, which is divided into several sections, including the stomach, small intestine, and large intestine; commonly called the *digestive tract* (two words)
13. Digestive juices secreted by stomach (two words)
16. Process by which foods are broken down to their nutrients so that they may be absorbed by body
18. Mucous membranes lubricated by secretions of cells and glands within the membrane itself
19. Food that has been mixed with gastric juice until food is almost liquid
21. Process of building, maintaining, and repairing tissue
22. Uptake of nutrients by villi in walls of small intestine for transfer to circulatory system
23. To disperse fine particles of insoluble material in liquid
26. Fingerlike projection that covers and gives velvety appearance to mucous membranes of small intestine; helps body absorb nutrients
27. Seven feet of small intestine immediately following duodenum; part of intestine where most absorption takes place
29. Any of the enzymes that break down proteins
30. Chemical substances secreted by glands to regulate functions of organs

DOWN

2. Elimination of body's waste products
4. Belch
5. Any enzyme that helps change starch into sugar
6. Peculiar, wavelike motion of intestines produced by contraction of muscular walls; moves food contents through intestines
10. Substance that speeds up specific breakdown of material; especially important in digestion and utilization of food by body
12. State of being satisfied; feeling full; having enough
14. Process of breaking down complex substances into simpler ones
15. Yellow, greenish fluid secreted by liver to aid in breakdown of fats; sometimes called the *liquid crowbar*

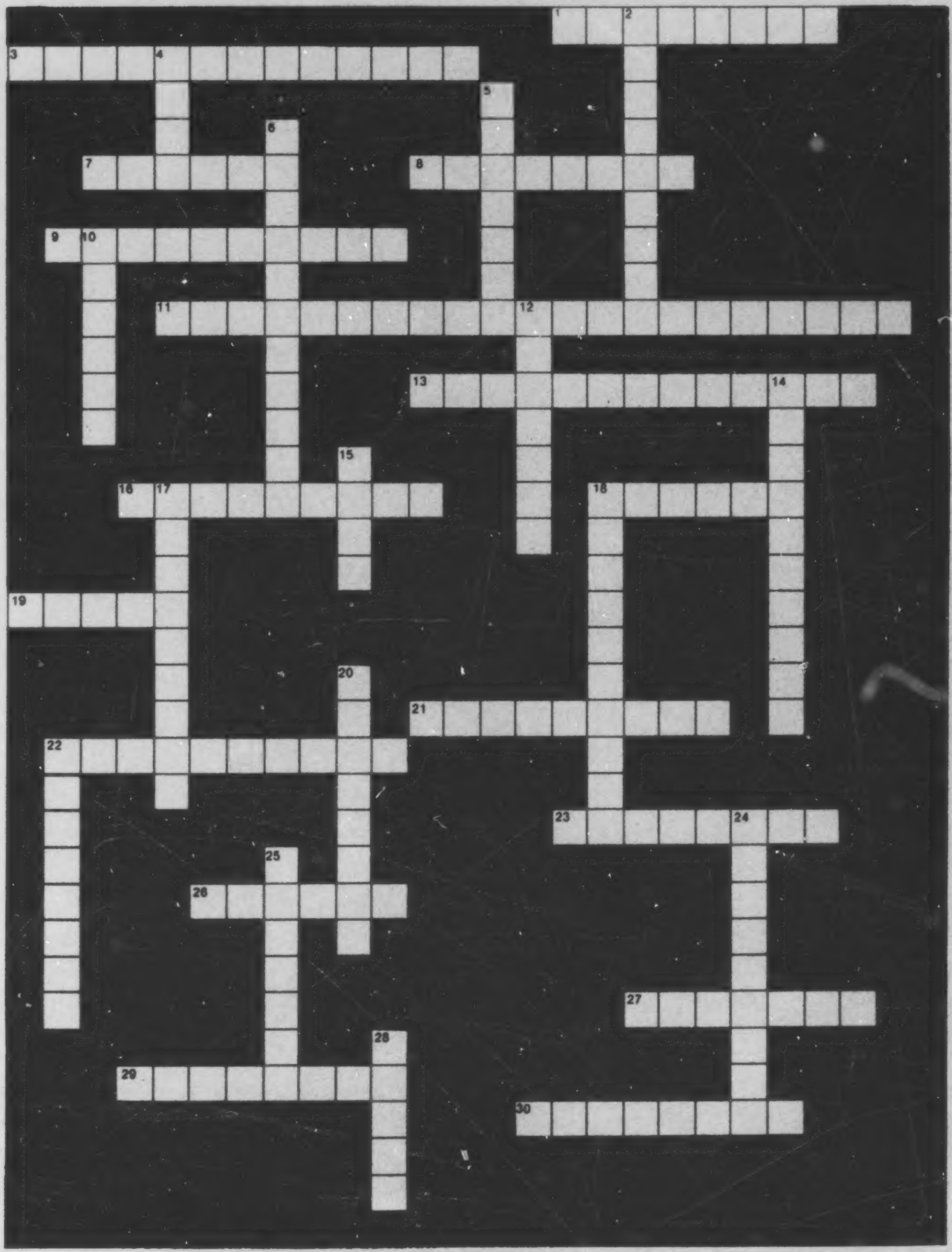
CLASS ASSIGNMENT SHEET #1

DOWN (continued)

17. Eating; taking food into body for digestion
18. General term for all chemical changes that occur in nutrients after they have been absorbed by body to be used in cells
20. First 10 inches of small intestine; site where most digestion is completed and where most digestive hormones are made; part of intestine where little absorption takes place
22. Protein produced in the body (blood system) usually in reaction to a specific foreign substance such as a bacterial infection
24. Substance that cannot be dissolved in a liquid
25. Simple sugar
28. Solid waste products excreted by the body

CLASS ASSIGNMENT SHEET #1

DIGESTION AND ABSORPTON CROSSWORD PUZZLE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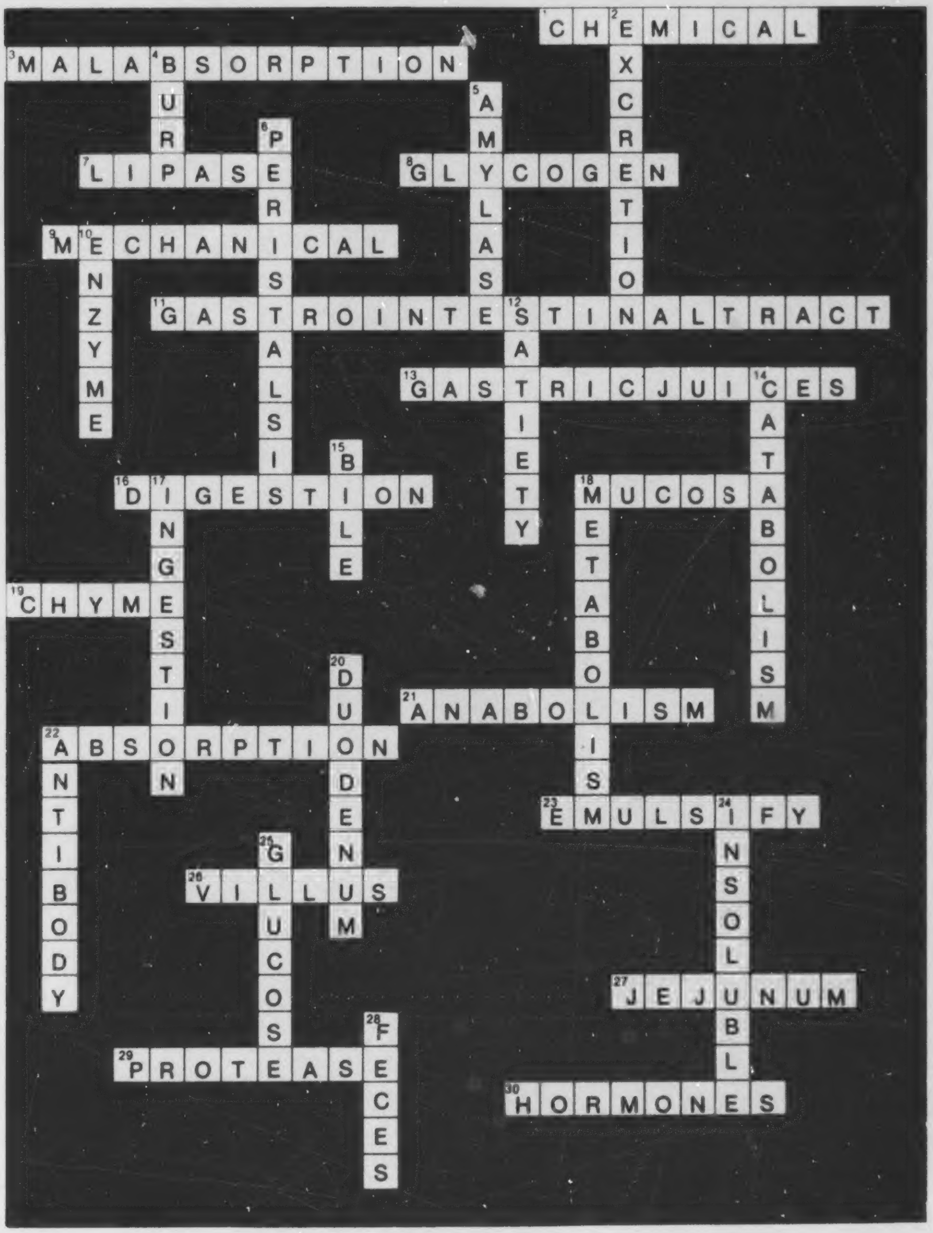
DIGESTION AND ABSORPTION
UNIT II

ANSWERS TO CLASS ASSIGNMENT SHEET

Class Assignment Sheet #1

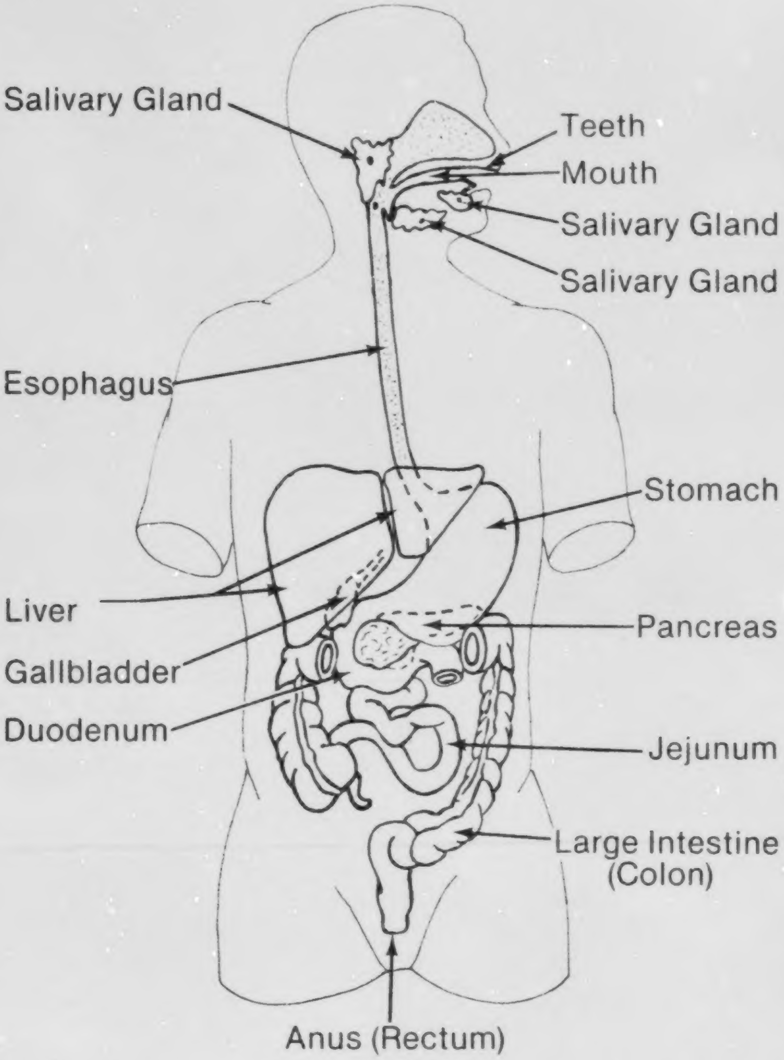

1 CHEMICAL
2 EXCRETION
3 MALABSORPTION
4 BURP
5 AMYLASE
6 PERISTALSIS
7 LIPASE
8 GLYCOGEN
9 MECHANICAL
10 ENZYME
11 GASTROINTESTINALTRACT
12 SATIETY
13 GASTRICJUICES
14 CATABOLISM
15 BILE
16 DIGESTION
17 INGESTION
18 METABOLISM
19 CHYME
20 DUODENUM
21 ANABOLISM
22 ANTIBODY
23 EMULSIFY
24 INSOLUBLE
25 GLUCOSE
26 VILLUS
27 JEJUNUM
28 FECES
29 PROTEASE
30 HORMONES

DIGESTION AND ABSORPTION
UNIT II

CLINICAL ASSIGNMENT SHEET #1--DESCRIBE THE DIGESTIVE PROCESS FROM INGESTION THROUGH EXCRETION

NAME ____________________ SCORE ____________

Understanding the relationships of the major and accessory organs of digestion and their enzymes is vital to being a food service supervisor. Using the digestive system illustrated below, describe to your clinical instructor the process of digestion from ingestion through excretion for each of the parts of the digestive system.


Salivary Gland
Teeth
Mouth
Salivary Gland
Salivary Gland
Esophagus
Stomach
Liver
Gallbladder
Duodenum
Pancreas
Jejunum
Large Intestine (Colon)
Anus (Rectum)

DIGESTION AND ABSORPTION
UNIT II

CLINICAL ASSIGNMENT SHEET #2--MAKE RECOMMENDATIONS TO IMPROVE THE NUTRITIONAL STATUS OF PATIENTS WITH IMPAIRED FOOD INTAKE, DIGESTION, OR ABSORPTION

NAME ______________________________ SCORE ______________

Digestion is influenced by many factors. If the digestive process is not functioning properly, the individual's appetite and food intake are affected. Being able to recognize signs of poor digestion will allow you to provide better patient care.

Visit three patients who are not able to eat enough. Answer the questions on the following pages for each patient. Use one sheet for each of the three patients.

(NOTE: In a facility where there is adequate staff, this is the function of the dietetic technician or dietitian.)

CLINICAL ASSIGNMENT SHEET #2

PART I--Patient #1

A. What is the diagnosis?____

____

B. Are any major digestive organs involved?____________________

C. If your answer is yes, which ones?____________________________

____

D. Are any accessory digestive organs involved?__________________

E. If your answer is yes, which ones?____________________________

____

F. Does the patient have dentures?__________ If so, are they ill-fitting?__________

G. Is the individual constipated?_________________________________

H. Are there any psychological factors affecting appetite?______________

I. What amount of food is eaten at one time?_______________________

J. Is the food attractively served?_________________________________

K. Why is this important?____

____

L. Write a paragraph concerning possible reasons for the patient's decreased intake. What steps do you plan to take to try to improve this patient's nutritional status?

____

____

____

____

M. Comments: ____________________________________

____

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____

FSS - 129-B

CLINICAL ASSIGNMENT SHEET #2

PART II--Patient #2

A. What is the diagnosis? ______________________________

____

B. Are any major digestive organs involved? ______________________________

C. If your answer is yes, which ones? ______________________________

____

D. Are any accessory digestive organs involved? ______________________________

E. If your answer is yes, which ones? ______________________________

____

F. Does the patient have dentures? __________ If so, are they ill-fitting? __________

G. Is the individual constipated? ______________________________

H. Are there any psychological factors affecting appetite? ______________________________

I. What amount of food is eaten at one time? ______________________________

J. Is the food attractively served? ______________________________

K. Why is this important? ______________________________

____

L. Write a paragraph concerning possible reasons for the patient's decreased intake. What steps do you plan to take to try to improve this patient's nutritional status?

____

____

____

____

M. Comments: ______________________________

____

____

____

____

____

CLINICAL ASSIGNMENT SHEET #2

PART III--Patient #3

A. What is the diagnosis?

B. Are any major digestive organs involved?

C. If your answer is yes, which ones?

D. Are any accessory digestive organs involved?

E. If your answer is yes, which ones?

F. Does the patient have dentures? If so, are they ill-fitting?

G. Is the individual constipated?

H. Are there any psychological factors affecting appetite?

I. What amount of food is eaten at one time?

J. Is the food attractively served?

K. Why is this important?

L. Write a paragraph concerning possible reasons for the patient's decreased intake. What steps do you plan to take to try to improve this patient's nutritional status?

M. Comments:

DIGESTION AND ABSORPTION
UNIT II

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2--Evaluated to the satisfaction of the clinical instructor

DIGESTION AND ABSORPTION
UNIT II

TEST

NAME ______________________________ SCORE ______________

1. Match terms associated with digestion and absorption to their correct definitions. Write the correct numbers in the blanks. Terms and definitions are continued on the next page.

______a. Digestive juices secreted by stomach

______b. Substance that speeds up specific breakdown of material; especially important in digestion and utilization of food by body

______c. Eating; taking food into body for digestion

______d. To disperse fine particles of insoluble material in liquid

______e. Changing physical state of food by reducing to small particles

______f. Food that has been mixed with gastric juice until food is almost liquid

______g. Fingerlike projection that covers and gives velvety appearance to mucous membranes of small intestine; helps body absorb nutrients

______h. Elimination of body's waste products

______i. State of being satisfied; feeling full; having enough

______j. Process by which foods are broken down to their nutrients so that they may be absorbed by body

______k. Protein produced in the body usually in reaction to a specific foreign substance such as a bacterial infection

______l. Breaking down nutrients in food by enzyme action

______m. Mucous membranes lubricated by secretions of cells and glands within the membrane itself

1. Excretion
2. Mucosa
3. Chyme
4. Gastric juices
5. Satiety
6. Villus
7. Emulsify
8. Antibody
9. Digestion
10. Ingestion
11. Enzyme
12. Chemical action of digestion
13. Mechanical action of digestion

TEST

______ n. Any enzyme that helps change starch into sugar

______ o. Form in which carbohydrate is stored in body's tissue; also called *animal starch*

______ p. Yellow, greenish fluid secreted by liver to aid in breakdown of fats; sometimes called the *liquid crowbar*

______ q. Inability to digest or absorb food in intestinal tract

______ r. Muscular, mucosa-lined tube, approximately 30 feet long, which is divided into several sections, including the stomach, small intestine, and large intestine; commonly called the *digestive tract*

______ s. Any of a group of enzymes that helps change fats into fatty acids and glycerol

______ t. Seven feet of small intestine immediately following duodenum; part of intestine where most absorption takes place

______ u. Peculiar, wavelike motion of intestines produced by contraction of muscular walls; moves food contents through intestines

______ v. Uptake of nutrients by villi in walls of small intestine for transfer to circulatory system

______ w. First 10 inches of small intestine; site where most digestion is completed and most digestive hormones are made; part of intestine where little absorption takes place

______ x. Substance that cannot be dissolved in a liquid

______ y. Chemical substances secreted by glands to regulate functions of organs

______ z. Simple sugar

______ aa. Solid waste products excreted by the body

14. Lipase
15. Amylase
16. Gastrointestinal tract (GI tract)
17. Glycogen
18. Jejunum
19. Malabsorption
20. Insoluble
21. Hormones
22. Absorption
23. Duodenum
24. Peristalsis
25. Bile
26. Glucose
27. Feces

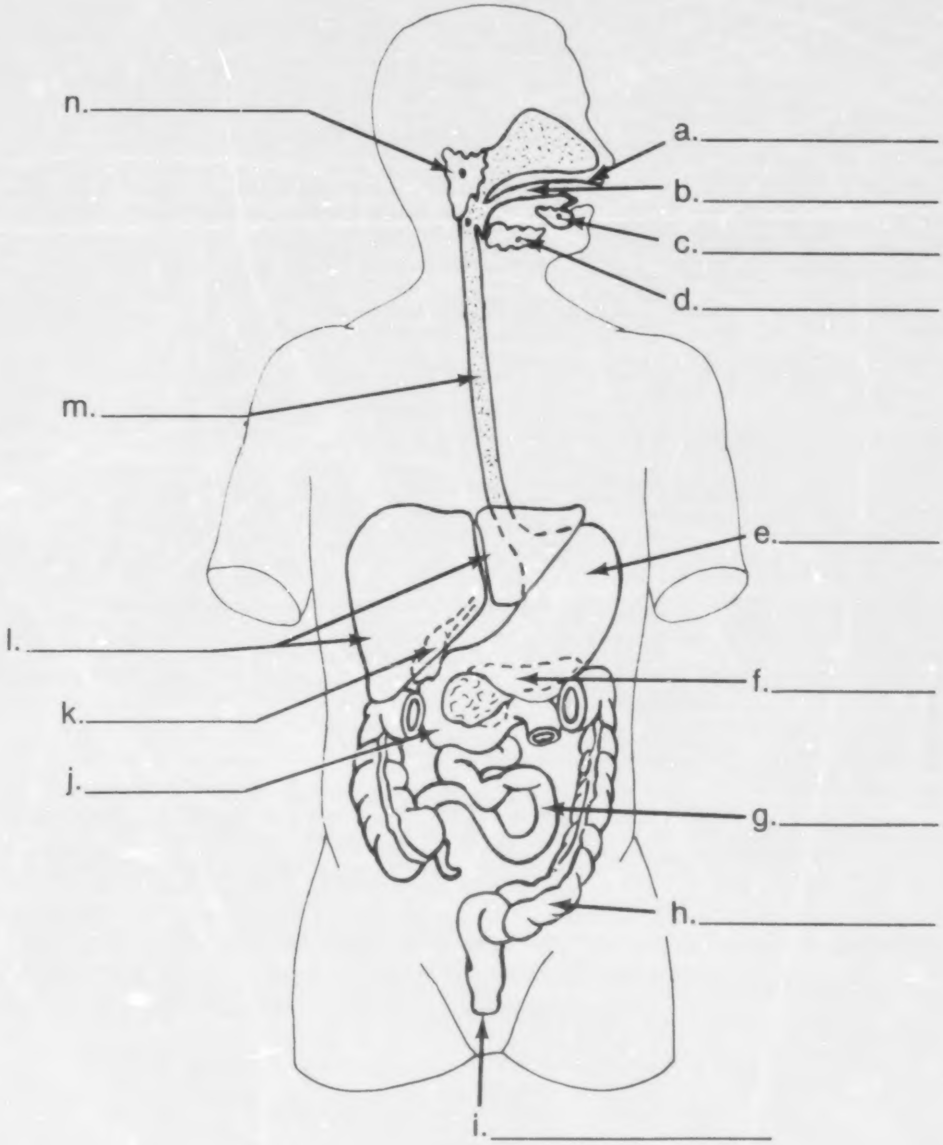
TEST

2. Identify parts of the body involved in digestion. Write the correct answers in the blanks. Answers may be used more than once.

Pancreas
Salivary gland
Liver
Jejunum

Teeth
Duodenum
Stomach
Mouth

Gallbladder
Esophagus
Large intestine (colon)
Anus (rectum)



TEST

3. Match major digestive organs to their correct functions. Write the correct numbers in the blanks.

_____a. Serves as a reservoir for food for the three or four hours needed for proper mixing; prepares food for digestion by changing it from a solid to a semifluid material (chyme) by peristalsis; begins digestion of proteins; secretes 2 to 3 quarts of gastric juices daily

_____b. Reabsorbs water, mineral salts, and vitamins; provides a site for bacteria that produce vitamin K and other bacteria that aid in absorption; secretes mucus to aid in movement of feces

_____c. Serves as a tubular passageway for food from mouth to stomach; secretes mucus to aid in food movement

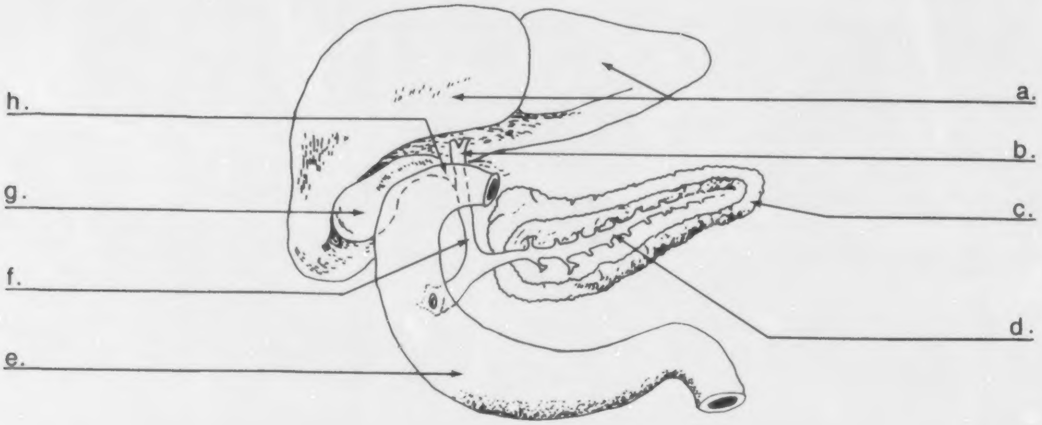
_____d. Receives digestive juice from the pancreas and bile from the liver; secretes intestinal juices; digests and absorbs greater part of food

_____e. Chews food into smaller particles; mixes food with saliva

1. Small intestine
2. Mouth
3. Stomach
4. Large intestine (colon)
5. Esophagus

4. Identify the liver, pancreas, and related structures. Write the correct answers in the blanks.

Common bile duct **Pancreatic duct** **Pancreas** **Liver**
Cystic duct **Hepatic duct** **Duodenum** **Gallbladder**



TEST

5. Distinguish among functions of the liver, gallbladder, and pancreas. Write an "L" in the blanks before functions of the liver, a "G" before functions of the gallbladder, and a "P" in the blanks before functions of the pancreas.

______a. Produces insulin, a hormone that aids in carbohydrate metabolism

______b. Metabolizes carbohydrates, fats, and proteins

______c. Forms antibodies

______d. Store bile until needed for digestion

______e. Removes toxins, bacteria, and worn-out blood cells

______f. Produces digestive juices (1 quart daily) that could probably adequately digest all foods if no other digestive juice were produced by the body

______g. Stores simple sugars such as glycogen

______h. Manufactures blood proteins and over one thousand enzymes

______i. Manufactures cholesterol

______j. Manufactures approximately 1 quart of bile daily, aiding in the metabolism of fats

______k. Stores vitamins A, D, K, and B_{12}

6. State three factors that influence the rate of digestion.

a. ____

b. ____

c. ____

7. Distinguish between mechanical and chemical digestion. Write an "M" in the blanks before mechanical digestion, and a "C" in the blanks before chemical digestion.

______a. Furnishes power needed by using muscles in tongue, jaw, throat, esophagus, stomach, and intestines

______b. Moistens and mixes food with digestive juices

______c. Changes carbohydrates to simple sugars in the mouth and small intestine

______d. Changes proteins into amino acids in the stomach and small intestine

TEST

_____e. Moves food along digestive tract

_____f. Breaks food into smaller particles

_____g. Breaks fat down with bile

_____h. Changes fats to fatty acids and glycerol in the stomach and small intestine

8. State role of stomach, small intestine, and large intestine in process of absorption.

a. Stomach-- ____

____

b. Small intestine--____

____

c. Large intestine--____

____

9. List nutrients that can be directly absorbed into circulatory system without digestion.

a. ____

b. ____

c. ____

10. Match nutrients to their digested products. Write the correct numbers in the blanks.

_____a. Fatty acids and glycerol

_____b. Amino acids

_____c. Simple sugars

1. Carbohydrates
2. Proteins
3. Fats

11. Distinguish among factors that improve or impair iron absorption. Write a "+" in the blanks before factors that improve iron absorption and a "–" in the blanks before factors that impair iron absorption.

_____a. Increased bodily need

_____b. Iron-containing foods from plant sources

_____c. Excessive use of soda or alkaline medications

TEST

______d. Iron-containing foods from animal sources

______e. Excessive use of coffee, tea, or other high-caffeine beverages

______f. Presence of foods containing vitamin C

12. List two physical symptoms of malabsorption.

a. ____

b. ____

13. Select from the following list causes of malabsorption. Write an "X" in the blank before each correct answer.

______a. Uncontrolled diabetes

______b. Heart disease

______c. Cancer

______d. Insufficient enzyme activity such as pancreatitis

______e. Hypertension

______f. Disease of small intestine, surgery, or radiation therapy

______g. Enzyme deficiency such as lactose deficiency

______h. Underweight

______i. Insufficient bile acid activity such as gallstones or inflammation of gallbladder

14. Match terms associated with metabolism to their correct definitions. Write the correct numbers in the blanks.

______a. Process of breaking down complex substances into simpler ones

______b. Process of building, maintaining, and repairing tissue

1. Catabolism
2. Anabolism

TEST

15. List in order the major physiological processes in utilization of food by the body.

    a. ______________________________

    b. ______________________________

    c. ______________________________

    d. ______________________________

    e. ______________________________

    f. ______________________________

(NOTE: Test questions 16 and 17 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

16. Describe the digestive process from ingestion through excretion.

17. Make recommendations to improve the nutritional status of patients with impaired food intake, digestion, or absorption.

DIGESTION AND ABSORPTION
UNIT II

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 427. The point total for questions 1-15 is 252; the point total for questions 16 and 17 is 175.)

1. (54 points)

   a. 4
   b. 11
   c. 10
   d. 7
   e. 13
   f. 3
   g. 6
   h. 1
   i. 5
   j. 9
   k. 8
   l. 12
   m. 2
   n. 15
   o. 17
   p. 25
   q. 19
   r. 16
   s. 14
   t. 18
   u. 24
   v. 22
   w. 23
   x. 20
   y. 21
   z. 26
   aa. 27

2. (28 points)

   a. Teeth
   b. Mouth
   c. Salivary gland
   d. Salivary gland
   e. Stomach
   f. Pancreas
   g. Jejunum (colon)
   h. Large intestine (colon)
   i. Anus (rectum)
   j. Duodenum
   k. Gallbladder
   l. Liver
   m. Esophagus
   n. Salivary gland

3. (10 points)

   a. 3
   b. 4
   c. 5
   d. 1
   e. 2

ANSWERS TO TEST

4. (16 points)

   a. Liver
   b. Hepatic duct
   c. Pancreas
   d. Pancreatic duct
   e. Duodenum
   f. Common bile duct
   g. Gallbladder
   h. Cystic duct

5. (33 points)

   a. P
   b. L
   c. L
   d. G
   e. L
   f. P
   g. L
   h. L
   i. L
   j. L
   k. L

6. (9 points)

   Answer should include any three of the following

   a. Kinds of food eaten
   b. Amount of food eaten at one time
   c. Psychological factors
   d. Chewing technique
   e. Individual variation in movement of the GI tract
   f. Disorders of the GI tract

7. (24 points)

   a. M
   b. M
   c. C
   d. [illegible]
   e. M
   f. M
   g. M
   h. C

ANSWERS TO TEST

8. (9 points)

a. Stomach--Very limited absorption of water glucose, alcohol, aspirin, and other drugs

b. Small intestine--Absorption through villi and microvilli of 90 percent of all nutrients

c. Large intestine--Very limited absorption, mainly of water

9. (3 points)

a. Water

b. Minerals

c. Vitamins

10. (6 points)

a. 3

b. 2

c. 1

11. (18 points)

a. +

b. –

c. –

d. +

e. –

f. +

12. (2 points)

Answer should include any two of the following

a. Weight loss

b. Diarrhea

c. Colonic pain

d. Abdominal distress

13. (18 points)

a, c, d, f, g, i

ANSWERS TO TEST

14. (4 points)

    a. 1

    b. 2

15. (18 points)

    a. Ingestion

    b. Digestion

    c. Absorption

    d. Circulation

    e. Metabolism

    f. Excretion

16. Evaluated to the satisfaction of the clinical instructor (25 points)

17. Evaluated to the satisfaction of the clinical instructor (150 points)

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

UNIT OBJECTIVE

After completing this unit, the student should be able to distinguish among several methods of determining nutritional adequacy and use them properly in judging individual and/or group food patterns. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with guidelines for nutritional adequacy to their correct definitions.
2. State purposes of establishing standard guidelines for nutritional adequacy.
3. State the Dietary Guidelines.
4. Distinguish between Daily Food Guide and Dietary Guidelines characteristics.
5. Describe adaptations for each group in the Daily Food Guide to incorporate the Dietary Guidelines.
6. Select from a list characteristics of food exchange lists.
7. Distinguish between Recommended Dietary Allowance and U.S. Recommended Dietary Allowances characteristics.
8. Select from a list types of information found on nutrition labels.
9. Select from a list information found in the 1980 RDA, 9th edition.
10. Identify food practices that will enable an individual to meet the Dietary Guidelines.
11. Calculate height and weight in metric values.
12. Estimate desirable body weight.
13. Calculate approximate caloric needs.
14. Evaluate menu for nutritional adequacy.
15. Compare nutritional content of foods by information on labels.

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

SUGGESTED ACTIVITIES

I. Suggested activities

A. Order material to supplement unit.

1. Booklets

a. *Food Exchange*--Color-coded booklet of the food exchange lists. Available from the American Dietetic Association, 430 North Michigan Avenue, Chicago, Illinois 60611.

(NOTE: This booklet is highly recommended.)

b. *Dietary Guidelines for Americans--and Your Health,* Home and Garden Bulletin #232, United States Department of Agriculture. Available from U.S. Government Printing Office, Washington, D.C. 20402.

(NOTE: A single copy may be obtained free from the county cooperative extension service.)

c. *Nutrition Education for the Elderly*--3rd ed., 1981. Available from Virginia Council on Health and Medical Care, 100 East Franklin Street, Richmond, Virginia 23219.

(NOTE: This booklet presents an overview of nutrition topics important to the elderly. It contains thirty-eight different lessons on such subjects as shopping, cooking, diet and disease, food misinformation, and basic nutrition. Each lesson is based on the U.S. Dietary Guidelines.)

2. Films

a. *Eat, Drink and Be Wary.* Color, 16 mm, 21 minutes. Available from Oklahoma State Department of Health, 1000 N.E. 10th Street, P.O. Box 53551, Oklahoma City, Oklahoma 73152, Attn: Film Library· phone (405) 271-5724.

(NOTE: In this film, children and critics [including Dr. Jean Mayer] vent their views on our eating habits and on the processed foods that now make up much of our diet. This film encourages a good basic diet containing a high proportion of unprocessed, natural foods.)

b. *Eating on the Run.* Color, 16 mm, 15 minutes. Available from Oklahoma State Department of Health.

(NOTE: In this film, we are depicted as a nation of people in a hurry. Many of us don't take the time to eat properly. An understanding of Basic Food Guide groups will help us to avoid nutritional trouble even while eating on the run.)

SUGGESTED ACTIVITIES

c. *The Unfinished Child.* Color, 25 minutes. Available from Oklahoma State Department of Health.

(NOTE: Thousands of children are born every year in America suffering from malnutrition. This film discusses the plight of the poor in urban centers and their lack of nutritionally adequate diets.)

3. Videotape--*Are We Eating Too Much?* Color, 3/4" U-matic, 60 minutes, 1980. Available from Audiovisual Resource Center, 8 Research Park, Cornell University, Ithaca, New York 14850.

   (NOTE: This tape focuses on dietary guidelines. Other issues covered are nutrient labeling, "natural" foods, and weight control. Panel discussion.)

4. Pamphlets

   a. *Nutrition Labeling--Terms You Should Know.* Available free from Food and Drug Administration, 5600 Fishers Lane, Rockville, Maryland 20852.

   b. *Read the Label, Set a Better Table.* Available free from Food and Drug Administration, 5600 Fishers Lane, Rockville, Maryland 20852.

   c. *We Want You to Know About Nutrition Labels on Food.* Available from Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

B. Make transparencies.

C. Provide students with objective sheet.

D. Discuss unit and specific objectives.

E. Provide students with information and assignment sheets.

F. Discuss information and assignment sheets.

G. Develop appropriate learning activities for special needs students.

H. Review "Basic Nutrition," *Food Service Worker,* Section B, Unit I.

I. Review "Nutrition in Food Production," *Food Production Worker,* Section A, Unit I.

J. Discuss naturally occurring sugars in the diet and have student list them on the board. Be certain that the common terms for sugar found on labels are included.

K. Have students prepare a graph comparing leader nutrients in one serving of Tang and one serving of orange juice, or in one serving of whole-grain cereal and one of enriched cereal.

SUGGESTED ACTIVITIES

L. Collect labels from different food items, including some food mixtures such as pizza and dessert items. Read to class ingredients and percentages of U.S. RDA. Have class identify food items from information on label.

M. Give test.

N. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Transparency masters

1. TM #1--Gram
2. TM #2--Meter
3. TM #3--Joule

E. Class assignment sheets

1. Class Assignment Sheet #1--Circle Terms Related to Guidelines for Nutritional Adequacy
2. Class Assignment Sheet #2--Analyze Food Practices
3. Class Assignment Sheet #3--Record RDA for Male and Female, Age 23 to 50 Years
4. Class Assignment Sheet #4--Calculate Height and Weight in Metric Values
5. Class Assignment Sheet #5--Estimate Desirable Body Weight
6. Class Assignment Sheet #6--Calculate Approximate Caloric Needs

F. Answers to class assignment sheets

G. Clinical assignment sheets

1. Clinical Assignment Sheet #1--Evaluate Menu for Nutritional Adequacy
2. Clinical Assignment Sheet #2--Compare Nutritional Content of Foods by Information on Labels

SUGGESTED ACTIVITIES

- H. Answers to clinical assignment sheets
- I. Test
- J. Answers to test

III. Unit references

A. American Dietetic Association. *Handbook of Clinical Dietetics.* Hanover, Massachusetts: Yale University Press, 1981.

B. McNutt, Kristen W., and David R. McNutt. *Nutrition and Food Choices.* Chicago: Science Research Associates, Inc., 1978.

C. *Nutrition Labeling--Tools for Its Use,* Agriculture Information Bulletin #382. April, 1975. Washington, D.C.: United States Department of Agriculture, 1975.

D. Pennington, Jean, and Helen Nichols. *Bowes and Church's Food Values of Portions Commonly Used,* 13th ed. Philadelphia: J.B. Lippincott Company, 1980.

E. *Recommended Dietary Allowances,* 9th ed. Washington, D.C.: National Research Council, National Academy of Sciences, 1980.

F. Robinson, Corrine H. *Basic Nutrition and Diet Therapy,* 4th ed. New York: MacMillan Publishing Company, Inc., 1980.

G. Wickham, Sandy J. *Human Nutrition: A Self-Instructional Text.* Bowie, Maryland: Robert J. Brady Company, 1982.

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

INFORMATION SHEET

I. Terms and definitions (Class Assignment Sheet #1)

A. Daily Food Guide--Food groups, including recommended serving sizes, intended to provide a basis for a daily meal plan adequate in nutrients for most healthy individuals

(NOTE: The adult pattern supplies approximately 1,200 calories.)

B. Dietary Guidelines--Simple statement of principles of Dietary Goals; considered appropriate for most healthy Americans

C. Food exchange lists--Groups of foods, in specific servings, with similar nutrient and caloric values; this system provides one of the most practical ways of teaching food selection and meal planning

(NOTE: Use of this system allows flexibility and variety in meal planning while including foods from recommended groupings.)

D. Gram--Metric measure of weight (Transparency #1)

E. Joule--Metric measure for energy; accepted international unit of energy (Transparency #3)

F. Meter--Metric measure of length (Transparency #2)

G. Recommended Dietary Allowances (RDA)--Levels of intake of essential nutrients considered to be adequate to meet known nutritional needs of practically all healthy adults

H. Therapeutic diet--Diet used in the treatment of disease; specific dietary restrictions are part of the remedies for healing

I. U.S. Recommended Dietary Allowances (U.S. RDA)--Standard recommended allowances devised by the United States Food and Drug Administration to meet the needs of nutritional labeling

(NOTE: The U.S. RDA includes all persons over four years old except pregnant and lactating women. It includes the highest recommended allowance for nutrients within this age category; thus it exceeds the needs of most people.)

II. Purposes of establishing standard guidelines for nutritional adequacy

A. To help individuals make appropriate food selections

EXAMPLES: Use Daily Food Guide, Dietary Goals, Dietary Guidelines, food exchange lists.

INFORMATION SHEET

B. To evaluate adequacy of intake

EXAMPLES: Use Recommended Dietary Allowances (RDA),United States Recommended Dietary Allowances (U. S. RDA).

C. To educate individuals to importance of good nutrition

III. Dietary Guidelines

A. Eat a variety of foods

EXAMPLE: Include selections of fruits, vegetables, whole grain and enriched breads and cereals, dairy products, meats, and legumes.

B. Maintain ideal weight

EXAMPLES: To improve eating habits, eat slowly, prepare smaller portions, and avoid second helpings. To lose weight, increase physical activity, eat less fat and fatty foods, eat less sugar and sweets, and avoid too much alcohol.

C. Avoid excessive fat, saturated fat, and cholesterol

EXAMPLES: Choose lean meats; eat organ meats and eggs in moderation. Limit your intake of butter and hydrogenated margarines. Trim excess fat from meats. Broil, bake, or boil rather than fry. Read labels to determine both amount and types of fat contained in food.

D. Eat food with adequate starch and fiber

EXAMPLES: Substitute starches for fats and sugars; select foods that are good sources of fiber and starch, such as whole-grain products, fruits and vegetables, beans, peas, and nuts.

E. Avoid excessive sugar

EXAMPLES: Use less of all sugars, including white sugar, brown sugar, honey, and syrups. Eat less candy, ice cream, cake, cookies; drink fewer soft drinks. Select fresh fruits or fruits canned without sugar. Read food labels for clues on sugar content; if the names *sucrose, glucose, maltose, dextrose, lactose, fructose*, or *syrup* appear first, then there is a large amount of sugar. Remember, how often you eat sugar is as important as how much sugar you eat.

F. Avoid too much sodium

EXAMPLES: To avoid too much sodium, learn to enjoy the unsalted flavors of foods. Add little or no salt to food at the table. Cook with only small amounts of added salt. Limit your intake of salty foods such as potato chips, pretzels, salted nuts and popcorn, condiments (soy sauce, steak sauce, garlic salt), cheese, pickles, and cured meats. Read labels carefully.

G. If you drink alcohol, do so in moderation

INFORMATION SHEET

IV. Characteristics of Daily Food Guide and the Dietary Guidelines

Guidelines	Source	Application	Emphasis
Daily Food Guide	Institute of Home Economics, U. S. Department of Agriculture	Healthy individuals; easy to use; individualized for calories and nutrients for specific age and sex groups	Food selection; groups are divided according to similar nutrient content
Dietary Guidelines	U.S. Department of Agriculture and U.S. Department of Health and Human Services	Healthy individuals; easy to use; not individualized for specific age and sex groups	Food selection; total calorie intake; carbohydrate, fat, and sodium

V. Adaptations for each group in the Daily Food Guide to incorporate the Dietary Guidelines (Class Assignment Sheet #2)

A. Milk group

1. Use skim or low-fat milk and low-fat cheese
2. Limit use of cheeses made from whole milk
3. Use whole milk for small children

   (NOTE: Children age one through three years need the essential fatty acids in whole milk for growth and development.)

B. Meat group

1. Include no more than 5 ounces of meat, fish, or poultry daily
2. Select lean meats
3. Use fish and poultry more frequently than red meats
4. Limit egg yolks to three or four per week

   (NOTE: Count one egg as a substitute for 1 ounce of meat.)

5. Use dried beans and peas frequently

   (NOTE: Legumes are a good protein source when combined with grain foods.)

C. Fruit/vegetable group--Increase intake of this group

D. Bread/cereal group

1. Increase substantially the intake of this group to meet energy needs and to supply iron and B-complex vitamins
2. Emphasize whole grains

INFORMATION SHEET

VI. Characteristics of food exchange lists

- A. Developed by the American Diabetes Association and American Dietetic Association
- B. Intended for normal and therapeutic diets
- C. Emphasize consumption of food, not nutrients

(NOTE: Exchange groups in stated servings of specific foods are divided according to similar nutrient distribution.)

EXAMPLE:

Nutrient Distribution of Food Exchange Lists

	Carbohydrate (gm)	Protein (gm)	Fat (gm)	Calories (gm)
Milk exchange (skim milk)	12	8		80
Vegetable exchange	5	2		25
Fruit exchange	10			40
Bread exchange	15	2		70
Lean meat exchange (1 oz)		7	3	55
Medium-fat meat (1 oz)		7	5	75
High-fat meat (1 oz)		7	8	100
Fat exchange			5	45

INFORMATION SHEET

VII. Characteristics of Recommended Dietary Allowances (RDA) and U.S. Recommended Dietary Allowances (U.S. RDA) (Class Assignment Sheet #3)

(NOTE: RDA and U.S. RDA are *not* used interchangeably.)

RDA	U.S. RDA
Established by Food and Nutrition Board of National Academy of Sciences, National Research Council (NOTE: First edition was published in 1943. The RDA is revised every five years.)	Established by Food and Drug Administration
Designed for population groups, not individuals	Standardized for nutritional labeling to permit consumers to compare products
Intended for healthy population	Intended for healthy population
Provides a margin of safety (NOTE: RDA values are selected to meet, or exceed by as much as 30 percent, the nutrient needs of most healthy individuals.)	Provides a margin of safety (NOTE: U.S. RDA values are based on 1968 RDA values to provide a safety margin like that of RDA.)
Planned to be met through a diet of a wide variety of foods	Planned to be met through a diet of a wide variety of foods
Recommendations, not requirements	Recommendations, not requirements
Recommendations made for wide variety of population groups (NOTE: The RDA has seventeen categories for age, sex, pregnancy, and lactation.)	Recommendations made for adults and children over four years (NOTE: Separate standards apply to infants under twelve months and children to four years.)
Emphasizes consumption of nutrients, not food (NOTE: Allowances have not been set for all fifty recognized nutrients.) EXAMPLE: Carbohydrate and fat have no RDA.	Emphasizes consumption of nutrients, not food

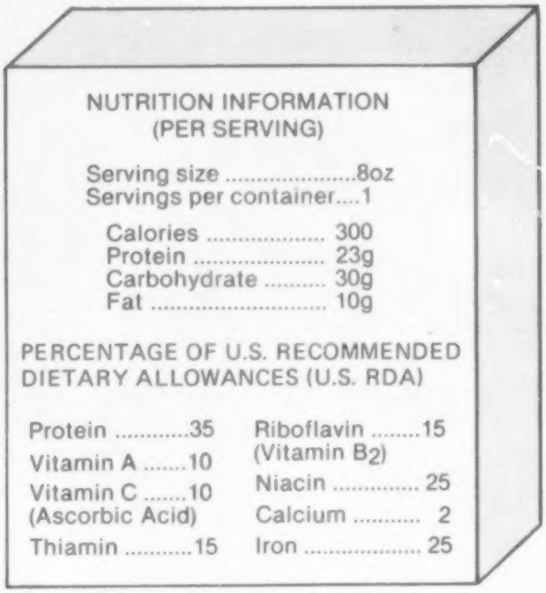
INFORMATION SHEET

VIII. Types of information found on nutrition labels (Figure 1; Clinical Assignment Sheets #1 and #2)

(NOTE: Nutrition labeling is voluntary unless a nutrition claim is made for a food or unless any nutrient is added to a food. In these two cases, full nutrition labeling is mandatory.)

EXAMPLE:

FIGURE 1



NUTRITION INFORMATION
(PER SERVING)

Serving size	8oz
Servings per container	1
Calories	300
Protein	23g
Carbohydrate	30g
Fat	10g

PERCENTAGE OF U.S. RECOMMENDED DIETARY ALLOWANCES (U.S. RDA)

Protein	35	Riboflavin (Vitamin B_2)	15
Vitamin A	10	Niacin	25
Vitamin C (Ascorbic Acid)	10	Calcium	2
Thiamin	15	Iron	25

A. Serving or portion size

(NOTE: The serving size given on a nutrition label represents the amount of food for which nutrition information is given. This may not be the same as the amount an individual chooses to eat.)

EXAMPLES: One slice, 1 cup, 3 ounces

B. Amount of main nutrients furnished by a specified serving of food as it comes from container

EXAMPLES: Amount of calories, protein, fat, carbohydrate

C. List of ingredients

(NOTE: Ingredients are listed in decreasing order of predominance. The ingredient present in the greatest amount by weight is listed first.)

INFORMATION SHEET

D. Percentage of the U.S. Recommended Dietary Allowances for leader nutrients

EXAMPLE: U.S. Recommended Dietary Allowances for use in nutrition labeling of foods

Nutrient	**Adults and Children Over Four Years**
Protein	65 gm*
Vitamin A	5,000 IU
Vitamin C	60 mg
Thiamin	1.5 mg
Riboflavin	1.7 mg
Niacin	20 mg
Calcium	1.0 gm
Iron	18 mg
Vitamin D	400 IU
Vitamin E	30 IU
Vitamin B_6	2.0 mg
Folacin	0.4 mg
Vitamin B_{12}	6 mcg
Phosphorus	1.0 gm
Iodine	150 mcg
Magnesium	400 mg
Zinc	15 mg
Copper	2 mg
Biotin	0.3 mg
Pantothenic acid	10 mg

*If protein efficiency ratio of protein is equal to or better than that of casein, U.S. RDA is 45 gm.

(NOTE: Nutrients shown in italic type are required on all labels; inclusion of other nutrients is allowed but not required.)

E. Optional information

EXAMPLES: Percentage of U.S. RDA for any of the twelve additional vitamins and minerals furnished by a serving; percentage of calories that come from fat, saturated fat, and cholesterol furnished by a specified serving; amount of sodium furnished by a serving of food

INFORMATION SHEET

Allowances for food energy and percentages of the U.S. RDA needed to meet the RDA for people of different ages

Age	Food energy[1]	Protein[2]	Vitamin A	Vitamin C	Thiamin	Ribo-flavin	Niacin[3]	Calcium	Iron
Years	*Calories*	*Percent of U.S. Recommended Daily Allowance*							
Child:									
1-3	1,300	35	40	70	50	50	30	80	85
4-6	1,800	50	50	70	60	65	35	80	60
7-10	2,400	55	70	70	80	75	50	80	60
Male:									
11-14	2,800	70	100	75	95	90	55	120	100
15-18	3,000	85	100	75	100	110	55	120	100
19-22	3,000	85	100	75	100	110	60	80	60
23-50	2,700	90	100	75	95	95	45	80	60
51+	2,400	90	100	75	80	90	35	80	60
Female:									
11-14	2,400	70	80	75	80	80	45	120	100
15-18	2,100	75	80	75	75	85	30	120	100
19-22	2,100	75	80	75	75	85	35	80	100
23-50	2,000	75	80	75	70	75	30	80	100
51+	1,800	75	80	75	70	65	25	80	60
Pregnant	+300[4]	+50[4]	100	100	+20[4]	+20[4]	35	120	100+
Nursing	+500[4]	+35[4]	120	135	+20[4]	+30[4]	35	120	100

[1] Calorie needs differ depending on body composition and size, age, and activity of the person.

[2] U.S. RDA of 65 grams is used for this table. In labeling, a U.S. RDA of 45 grams is used for foods providing high-quality protein, such as milk, meat, and eggs.

[3] The percentage of the U.S. RDA shown for niacin will provide the RDA for niacin if the RDA for protein is met. Some niacin is derived in the body from tryptophan, an amino acid present in protein.

[4] To be added to the percentage for the girl or woman of the appropriate age.

Source: U.S. Recommended Dietary Allowance, 'Food Labeling," Federal Register, vol. 38, no. 49, part II, March 14, 1973. Recommended Dietary Allowances, 8th ed. 1974, National Academy of Sciences, National Research Council.

(NOTE: Most people do not need 100 percent of the U.S. RDA for every nutrient.)

INFORMATION SHEET

IX. Information found in 1980 RDA, 9th edition (Class Assignment Sheets #3-#6)

A. Allowances for protein

(NOTE: RDA is based on 0.8 gram protein per kilogram of body weight.)

B. Allowances for three fat-soluble vitamins

EXAMPLE: Vitamins A, D, and E

C. Allowances for seven water-soluble vitamins

EXAMPLE: Vitamin C, thiamin, riboflavin, niacin, vitamin B_6, folacin, vitamin B_{12}

D. Allowances for six minerals

EXAMPLE: Calcium, phosphorus, magnesium, iron, zinc, iodine

E. Allowances for calories

(NOTE: Calorie allowances, as well as all other nutrient allowances in the RDA, are based on knowledge that requirements vary with age, body size, and sex.)

(CAUTION: Recommended calorie allowances are estimates of average needs of population groups, not recommended intakes for individuals.)

F. Allowances for increased nutrients for pregnant and nursing women

Gram

	TERM	ABBREVIATION/PREFIX		MEANING	CONVERSION METHOD
Metric measure of weight is gram (g)	Kilogram	kg	kilo	One thousand times (1,000 g)	1,000 X g
	Milligram	mg	milli	One thousandth (1/1,000)	0.001 X g
	Microgram	μg	micro	One millionth (1/1,000,000)	0.000001 X g

TM #1

FSS - 161-B

Meter

Metric measure of length is meter (m)	TERM	ABBREVIATION/PREFIX		MEANING	CONVERSION METHOD
	Centimeter	cm	Centi	One hundredth (1/100)	0.01 X m

Joule

Metric measure of energy is joule (J)	TERM	ABBREVIATION/PREFIX		MEANING	CONVERSION METHOD
	Kilojoule	kj	Kilo	One thousand times (1,000 J)	1,000 X J

NOTE: One kilocalorie is equal to 4.2 kilojoules; therefore, 1 gram protein or carbohydrate that is metabolized in body equals 4 kilocalories *or* 17 kilojoules.

FSS - 167-B

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

CLASS ASSIGNMENT SHEET #1--CIRCLE TERMS RELATED TO GUIDELINES FOR NUTRITIONAL ADEQUACY

NAME ______________________________ SCORE ______________

Circle terms related to the guidelines for nutritional adequacy hidden in the puzzle below. The words may be written horizontally, vertically, diagonally, or backwards. Some words may overlap.

FOOD EXCHANGE LISTS

GRAM

METER

JOULE

DIETARY GUIDELINES

THERAPEUTIC DIET

DAILY FOOD GUIDE

RECOMMENDED DIETARY ALLOWANCES

U. S. RDA

Y	R	A	T	E	I	D	D	E	D	N	E	M	M	O	C	E	R	S
C	A	L	L	O	W	A	N	C	E	S	W	S	E	R	F	X	S	P
B	N	O	O	X	R	I	F	G	U	I	D	E	T	M	O	C	T	X
W	I	N	S	P	V	L	O	A	R	A	T	H	E	P	O	H	S	M
M	U	S	R	D	A	Y	O	S	D	U	E	W	R	M	D	A	I	C
B	X	G	A	X	W	E	D	M	A	R	G	I	A	O	H	N	L	I
D	A	P	M	W	D	A	W	A	A	L	A	H	R	Y	L	G	P	A
O	M	M	J	Y	O	I	O	P	M	V	R	S	Y	G	O	E	T	K
I	J	O	P	Z	G	Y	E	W	O	L	M	N	D	R	L	O	W	M
S	P	X	M	F	D	U	O	T	R	L	B	X	I	U	S	R	Q	N
T	M	W	D	O	T	N	I	A	A	E	P	A	O	U	T	E	S	S
F	D	I	D	I	E	T	D	D	E	R	O	J	T	M	R	X	P	E
U	E	A	C	O	P	W	A	O	E	Y	Y	O	M	E	E	R	C	A
R	D	O	P	D	A	Y	R	W	S	L	E	M	E	Y	O	P	X	W
T	B	U	T	M	O	N	D	Y	A	P	I	I	A	E	L	A	E	G
Y	W	P	C	N	L	N	M	N	L	A	E	N	L	S	L	E	C	A
C	X	R	E	B	D	E	O	N	I	O	L	R	E	Q	C	A	F	E
B	Z	Q	X	S	E	S	R	E	S	L	K	T	X	S	M	Z	Y	R

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GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

CLASS ASSIGNMENT SHEET #2--ANALYZE FOOD PRACTICES

NAME ________________________________ SCORE ______________

The Dietary Guidelines are a simple method to allow food choices for maximum health benefits. They were developed for healthy individuals, using current known nutritional facts. They do not give absolute recommendations, but generalized statements for individuals to evaluate their food practices.

Dietary Guidelines

Eat a variety of foods

Maintain ideal weight

Avoid too much fat, saturated fat, and cholesterol

Eat food with adequate starch and fiber

Avoid too much sugar

Avoid too much sodium

If you drink alcohol, do so in moderation

PART I

Compile a 24-hour recall of foods and beverages you ingested in that time period. List each food and beverage for each meal and snack, including approximate amounts consumed.

EXAMPLE: 1 ham and cheese sandwich
  1 oz ham
  1 oz cheese
  1 t mayonnaise
  Lettuce
  2 slices tomato
  2 slices whole wheat bread

PART II

Answer the following questions based on the 24-hour recall completed in Part I.

A. Do you eat a variety of foods, including selections of fruits, vegetables, whole-grain and enriched breads and cereals, dairy products, meats, and legumes?

____

If not, which foods are lacking or insufficient? ______________________

____

CLASS ASSIGNMENT SHEET #2

B. Are you ideal weight? ____________________ If not, how much do you need to gain or lose? ____________________

C. Look at the fat servings in your diet. Are most of your foods fried? ____________

1. What type of margarine do you use? ____________________
2. What type of fat do you use for frying? ____________________
3. Do you carefully trim the fat from meat before cooking? ____________
4. How many fats from animal sources are included in your menu? ____________

D. Do you have a good source of fiber in your diet? ____________________

Do you include some raw fruit or raw vegetables? ____________________

E. How many teaspoons of sugar do you use in your beverages or on your cereal?

1. How many dessert items do you include? ____________________
2. How many soft drinks do you drink? ____________________

F. Do you use table salt without tasting the food first? ____________________

G. Do you always include potato chips, cured meats, or canned soups in your diet?

____

H. Do you drink alcohol regularly? ____________________

I. Are there changes you want to make in your food habits? ____________________

____

____

Comments: ____

____

____

____

____

____

____

____

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

CLASS ASSIGNMENT SHEET #3--RECORD RDA FOR MALE AND FEMALE, AGE 23 TO 50 YEARS

NAME ______________________________ SCORE ______________

For the Recommended Dietary Allowances to be useful, it is important to learn to read the tables. Refer to Section VII of the Information Sheet and the charts on the following pages. Record the RDA for leader nutrients for male and female, age 23 to 50 years.

Nutrient	Adult RDA (23 to 50 years of age)	
	Male	Female
Vitamin A		
Vitamin D		
Vitamin C		
Thiamin		
Riboflavin		
Niacin		
Calcium		
Iron		

CLASS ASSIGNMENT SHEET #3

Recommended Daily Dietary Allowances[a], Revised 1980

Food and Nutrition Board, National Academy of Sciences--National Research Council
Designed for the maintenance of good nutrition of practically all healthy people in the U.S.A.

Part I

	Age (years)	Weight (kg)	Weight (lbs)	Height (cm)	Height (in)	Protein (g)	Fat-Soluble Vitamins			Water-Soluble Vitamins							Minerals					
							Vitamin A (g R.E.) [b]	Vitamin D (g) [c]	Vitamin E (mg a T.E.) [d]	Vitamin C (mg)	Thiamin (mg)	Riboflavin (mg)	Niacin (mg N.E.) [e]	Vitamin B_4 (mg)	Folacin (g)	Vitamin B_{12} (g)	Calcium (mg)	Phosphorus (mg)	Magnesium (mg)	Iron (mg)	Zinc (mg)	Iodine (g)
Infants	0.0-0.5	6	13	60	24	kg X 2.2	420	10	3	35	0.3	0.4	6	0.3	30	0.5[g]	360	240	50	10	3	40
	0.5-1.0	9	20	71	28	kg X 2.0	400	10	4	35	0.5	0.6	8	0.6	45	1.5	540	360	70	15	5	50
Children	1-3	13	29	90	35	23	400	10	5	45	0.7	0.8	9	0.9	100	2.0	800	800	150	15	10	70
	4-6	20	44	112	44	30	500	10	6	45	0.9	1.0	11	1.3	200	2.5	800	800	200	10	10	90
	7-10	28	62	132	52	34	700	10	7	45	1.2	1.4	16	1.6	300	3.0	800	800	250	10	10	120
Males	11-14	45	99	157	62	45	1000	10	8	50	1.4	1.6	18	1.8	400	3.0	1200	1200	350	18	15	150
	15-18	66	145	176	69	56	1000	10	10	60	1.4	1.7	18	2.0	400	3.0	1200	1200	400	18	15	150
	19-22	70	154	177	70	56	1000	7.5	10	60	1.5	1.7	19	2.2	400	3.0	800	800	350	10	15	150
	23-50	70	154	178	70	56	1000	5	10	60	1.4	1.6	18	2.2	400	3.0	800	800	350	10	15	150
	51+	70	154	178	70	56	1000	5	10	60	1.2	1.4	16	2.2	400	3.0	800	800	350	10	15	150
Females	11-14	46	101	157	62	46	800	10	8	50	1.1	1.3	15	1.8	400	3.0	1200	1200	300	18	15	150
	15-18	55	120	163	64	46	800	10	8	60	1.1	1.3	14	2.0	400	3.0	1200	1200	300	18	15	150
	19-22	55	120	163	64	44	800	7.5	8	60	1.1	1.3	14	2.0	400	3.0	800	800	300	18	15	150
	23-50	55	120	163	64	44	800	5	8	60	1.0	1.2	13	2.0	400	3.0	800	800	300	18	15	150
	51+	55	120	163	64	44	800	5	8	60	1.0	1.2	13	2.0	400	3.0	800	800	300	10	15	150
Pregnant						+30	+200	+5	+2	+20	+0.4	+0.3	+2	+0.6	+400	+1.0	+400	+400	+150	h	+5	+25
Lactating						+20	+400	+5	+3	+40	+0.5	+0.5	+5	+0.5	+100	+1.0	+400	+400	+150	h	+10	+50

▲

[a] The allowances are intended to provide for individual variations among most normal persons as they live in the United States under usual environmental stresses. Diets should be based on a variety of common foods in order to provide other nutrients for which human requirements have been less well defined.

[b] Retinol equivalents. 1 Retinol equivalent = 1 g retinol or 6 g carotene.

[c] As cholecalciferol. 10 g cholecalciferol = 400 I.U. vitamin D.

[d] a -locopherol equivalents. 1 mg d-a-locopherol = 1 a T.E.

[e] 1 N.E. (niacin equivalent) is equal to 1 mg of niacin or 60 mg of dietary tryptophan.

[f] The folacin allowances refer to dietary sources as determined by *Lactobacillus casei* assay after treatment with enzymes ("conjugases") to make polyglutamyl forms of the vitamin available to the test organism.

[g] The RDA for vitamin B_{12} in infants is based on average concentration of the vitamin in human milk. The allowances after weaning are based on energy intake (as recommended by the American Academy of Pediatrics) and consideration of other factors such as intestinal absorption.

[h] The increased requirement during pregnancy cannot be met by the iron content of habitual American diets nor by the existing iron stores of many women; therefore the use of 30-60 mg of supplemental iron is recommended. Iron needs during lactation are not substantially different from those of non-pregnant women, but continued supplementation of the mother for 2-3 months after parturition is advisable in order to replenish stores depleted by pregnancy.

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CLASS ASSIGNMENT SHEET #3

Recommended Dietary Allowances, Revised 1980

Food and Nutrition Board, National Academy of Sciences--National Research Council, Washington, D.C.

Estimated Safe and Adequate Daily Dietary Intakes of Selected Vitamins and Minerals[a]

Part II

		Vitamins			Trace Elements[b]						Electrolytes		
	Age (years)	Vitamin K (g)	Biotin (g)	Pantothenic Acid (mg)	Copper (mg)	Manganese (mg)	Fluoride (mg)	Chromium (mg)	Selenium (mg)	Molybdenum (mg)	Sodium (mg)	Potassium (mg)	Chloride (mg)
Infants	0-0.5	12	35	2	0.5-0.7	0.5-0.7	0.1-0.5	0.01-0.04	0.01-0.04	0.03-0.06	115-350	350-925	275-700
	0.5-1	10-20	50	3	0.7-1.0	0.7-1.0	0.2-1.0	0.02-0.06	0.02-0.06	0.04-0.08	250-750	425-1275	400-1200
Children	1-3	15-30	65	3	1.0-1.5	1.0-1.5	0.5-1.5	0.02-0.08	0.02-0.08	0.05-0.1	325-975	550-1650	500-1500
and	4-6	20-40	85	3-4	1.5-2.0	1.5-2.0	1.0-2.5	0.03-0.12	0.03-0.12	0.06-0.15	450-1350	775-2325	700-2100
Adolescents	7-10	30-60	120	4-5	2.0-2.5	2.0-3.0	1.5-2.5	0.05-0.2	0.05-0.2	0.1-0.3	600-1800	1000-3000	925-2775
	11+	50-100	100-200	4-7	2.0-3.0	2.5-5.0	1.5-2.5	0.05-0.2	0.05-0.2	0.15-0.5	900-2700	1525-4575	1400-4200
Adults		70-140	100-200	4-7	2.0-3.0	2.5-5.0	1.5-4.0	0.05-0.2	0.05-0.2	0.15-0.5	1100-3300	1875-5625	1700-5100

▲

[a] Because there is less information on which to base allowances, these figures are not given in the main table of the RDA and are provided here in the form of ranges of recommended intakes.

[b] Since the toxic levels for many trace elements may be only several times usual intakes, the upper levels for the trace elements given in this table should not be habitually exceeded.

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CLASS ASSIGNMENT SHEET #3

Part II (Continued)

Mean Heights and Weights and Recommended Energy Intake[a] Recommended Dietary Allowances, Revised 1980

Category	Age (years)	Weight (kg)	Weight (lb)	Height (cm)	Height (in)	Energy Needs (with range) (kcal)	Energy Needs (with range) (MJ)
Infants	0.0-0.5	6	13	60	24	kg X 115 (95-145)	kg X .48
	0.5-1.0	9	20	71	28	kg X 105 (80-135)	kg X .44
Children	1-3	13	29	90	35	1300 (900-1800)	5.5
	4-6	20	44	112	44	1700 (1300-2300)	7.1
	7-10	28	62	132	52	2400 (1650-3300)	10.1
Males	11-14	45	99	157	62	2700 (2000-3700)	11.3
	15-18	66	145	176	69	2800 (2100-3900)	11.8
	19-22	70	154	177	70	2900 (2500-3300)	12.2
	23-50	70	154	178	70	2700 (2300-3100)	11.3
	51-75	70	154	178	70	2400 (2000-2800)	10.1
	76+	70	154	178	70	2050 (1650-2450)	8.6
Females	11-14	46	101	157	62	2200 (1500-3000)	9.2
	15-18	55	120	163	64	2100 (1200-3000)	8.8
	19-22	55	120	163	64	2100 (1700-2500)	8.8
	23-50	55	120	163	64	2000 (1600-2400)	8.4
	51-75	55	120	163	64	1800 (1400-2200)	7.6
	76+	55	120	163	64	1600 (1200-2000)	6.7
Lactation						+500	
Pregnancy						+300	

[a] The data in this table have been assembled from the observed median heights and weights of children shown in Part 1, together with desirable weights for adults given in Part 1 for the mean heights of men (70 inches) and women (64 inches) between the ages of 18 and 34 years as surveyed in the U.S. population (HEW/NCHS data).

The energy allowances for the young adults are for men and women doing light work. The allowances for the two older groups represent mean energy needs over these age spans, allowing for a 2% decrease in basal (resting) metabolic rate per decade and a reduction in activity of 200 kcal/day for men and women between 51 and 75 years, 500 kcal for men over 75 years and 400 kcal for women over 75. The customary range of daily energy output is shown for adults in parentheses, and is based on a variation in energy needs of 400 kcal at any one age, emphasizing the wide range of energy intakes appropriate for any group of people.

Energy allowances for children through age 18 are based on median energy intakes of children of these ages followed in longitudinal growth studies. The values in parentheses are 10th and 90th percentiles of energy intake, to indicate the range of energy consumption among children of these ages.

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GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

CLASS ASSIGNMENT SHEET #4--CALCULATE HEIGHT AND WEIGHT IN METRIC VALUES

NAME ________________________________ SCORE ____________

The internationally approved method of measurement is the metric system. It will be useful to learn to change pounds to kilograms and inches to centimeters.

PART I

Measure and weigh yourself. Record the figures in the appropriate blanks. Using the following instructions, calculate your body size in metric values.

A. Your weight in pounds ______________ Weight in kilograms ______________

1 kilogram equals 2.2 pounds

To convert pounds to kilograms, divide the pounds by 2.2 or multiply by 0.45

EXAMPLE: Weight: 120 pounds or 54 kilograms

```
   120 pounds                         54. kilograms
 x 0.45 conversion factor     2.2 )120.0
   600                              110
  480                                100
  54.00 kilograms                     88
                                      12
```

B. The Recommended Dietary Allowance for protein is 0.8 grams per kilogram of body weight. How many grams of protein should you eat? ____________________

EXAMPLE: Weight in kilograms multiplied by 0.8

```
   54 kilograms
 x 0.8 grams/kilogram
  43.2 grams
```

C. Your height in inches ______________ Height in centimeters ______________

1 inch equals 2.54 centimeters

To convert inches to centimeters, multiply inches by 2.54 (conversions to centimeters and kilograms are rounded off to nearest whole number).

EXAMPLE: Height 5' 4" or 64 inches or 163 centimeters

```
   2.54 conversion factor
 x  64 inches
  1016
 1524
 162.56 or 163 centimeters
```

CLASS ASSIGNMENT SHEET #4

PART II

Using the chart on the following page, find your height without shoes. Compare your weight with the suggested weights for your height.

A. Your height ____________ Your present weight ____________

B. Suggested weights for your height Low ____________

Medium ____________

High ____________

C. How do you compare? ____________

Comments? ____________

CLASS ASSIGNMENT SHEET #4

SUGGESTED WEIGHTS FOR HEIGHTS FOR MEN AND WOMEN*

Weight (without clothing)

Height (without shoes)		Low		Medium		High	
cm	in	kg	lb	kg	lb	kg	lb
				MEN			
160	63	54	118	59	129	64	141
163	64	55	122	60	133	66	145
165	65	57	126	62	137	68	149
167	66	59	130	65	142	70	155
170	67	61	134	67	147	73	161
173	68	63	139	69	151	75	166
175	69	65	143	70	155	77	170
178	70	67	147	72	159	80	174
180	71	68	150	74	163	81	178
183	72	70	154	76	167	83	183
185	73	72	158	77	171	85	188
188	74	74	162	80	175	87	192
191	75	75	165	81	178	89	195
				WOMEN			
152	60	45	100	50	109	54	118
155	61	47	104	51	112	55	121
157	62	49	107	52	115	57	125
160	63	50	110	54	118	58	128
163	64	51	113	55	122	60	132
165	65	53	116	57	125	61	135
167	66	55	120	59	129	63	139
170	67	56	123	60	132	65	142
173	68	57	126	62	136	66	146
175	69	59	130	64	140	69	151
178	70	60	133	65	144	71	156
180	71	62	137	67	148	73	161
183	72	64	141	69	152	75	166

*Data for heights in inches and weights in pounds taken from M.L. Hathaway and E.D. Foard, *Heights and Weights of Adults in the United States,* Home Economics Research Report No. 10, U.S. Department of Agriculture, Washington, D.C. Table 80, p.111. Conversions to centimeters and kilograms were rounded off to the nearest whole number.

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

CLASS ASSIGNMENT SHEET #5--ESTIMATE DESIRABLE BODY WEIGHT

NAME ______________________________ SCORE ____________

Desirable body weight or ideal weight is suggested by average height and weight charts with reference to body frame size and age. The charts are frequently developed by life insurance companies and indicate the weights that are related to longest life expectancy. A rule-of-thumb method of determining desirable body weight is found in the chart below. This gives an approximate ideal weight most applicable to the person of medium frame. Using this chart, estimate your desirable weight.

Calculation of Desirable Body Weight

Build	Women	Men
Medium frame	Allow 100 lb for first 5 ft of height, plus 5 lb for each additional inch	Allow 106 lb for first 5 ft of height, plus 6 lb for each additional inch
Small frame	Subtract 10%	Subtract 10%
Large frame	Add 10%	Add 10%

Source: Reprinted from Davidson, J.K.: Postgrad. Med. 59:114, 1976.

EXAMPLE:	Man 5' 11"	106 (lb for first 5 ft)
	Small frame	+ 66 (lb for additional inches over 5 ft)
		172
	Subtract 10%	- 17 (small frame adjustment)
		155 pounds desirable weight

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GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

CLASS ASSIGNMENT SHEET #6--CALCULATE APPROXIMATE CALORIC NEEDS

NAME ________________________________ SCORE ______________

Estimation of the daily energy (caloric) needs of an adult is necessary to ensure quality nutritional care. The following formula is for healthy individuals and is used to determine the calories needed to keep an individual in energy balance. Use the desirable weight that you calculated for yourself in Class Assignment Sheet #5, and estimate the approximate caloric needs you have for one day.

A. Determine basal calories (1 kcal/hour/kg body weight). (Multiply desirable body weight in kilograms times 24 hours.) ______________________________

B. Add voluntary activity calories (use one category) ______________________

1. Sedentary--30 percent basal calories (0.30 times answer in A)

   (NOTE: For adults over age seventy-six, use 20 percent basal calories to determine activity calories.)

2. Moderate activity--40 percent of basal calories (0.40 times answer in A)

3. Strenuous activity--50 percent of basal calories (0.50 times answer in A)

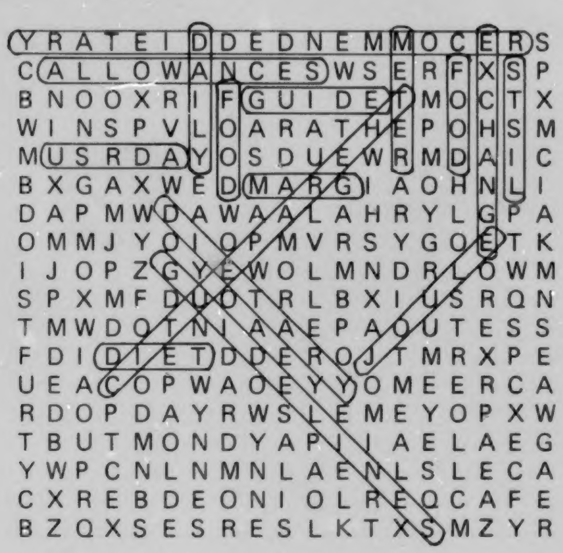
C. Total answers in A and B for estimated daily caloric needs ________________

D. Does your calculation fall within the kilocalorie range given in the Heights and Weights table of RDAs in Class Assignment Sheet #3? __________________

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1



```
Y R A T E I D D E D N E M M O C E R S
C A L L O W A N C E S W S E R F X S P
B N O O X R I F G U I D E T M O C T X
W I N S P V L O A R A T H E P O H S M
M U S R D A Y O S D U E W R M D A I C
B X G A X W E D M A R G I A O H N L I
D A P M W D A W A A L A H R Y L G P A
O M M J Y O I O P M V R S Y G O E T K
I J O P Z G Y E W O L M N D R L O W M
S P X M F D U O T R L B X I U S R Q N
T M W D O T N I A A E P A O U T E S S
F D I D I E T D D E R O J T M R X P E
U E A C O P W A O E Y Y O M E E R C A
R D O P D A Y R W S L E M E Y O P X W
T B U T M O N D Y A P I I A E L A E G
Y W P C N L N M N L A E N L S L E C A
C X R E B D E O N I O L R E Q C A F E
B Z Q X S E S R E S L K T X S M Z Y R
```

Class Assignment Sheet #2--Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #3

Nutrient	Adult RDA (23-50 Years of age) Male	Female
Vitamin A	1000 µg R.E.	800 R.E.
Vitamin D	5 µg	5 µg
Vitamin C	60 mg	60 mg
Thiamin	1.4 mg	1.0 mg
Riboflavin	1.6 mg	1.2 mg
Niacin	18 mg N.E.	13 mg N.E.
Calcium	800 mg	800 mg
Iron	10 mg	18 mg

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #4--Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #5--Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #6--Evaluated to the satisfaction of the class instructor

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

CLINICAL ASSIGNMENT SHEET #1--EVALUATE MENU FOR NUTRITIONAL ADEQUACY

NAME ______________________________ SCORE ______________

Recommended Dietary Allowances (RDA) are used to check the nutritional adequacy of intakes of groups of people. They are not designed to check nutritional adequacy of an individual's diet.

Using food composition tables and one day's menu from your facility, compare the nutrient intake of the menu against the RDA for females, age twenty-three to fifty. Record your figures and totals on the form below and on the following page. If combination foods are consumed, such as macaroni and cheese, estimate the amount of each food in the casserole, and record those figures.

MENU

EXAMPLE:

	Protein (g)	Calcium (mg)	Iron (mg)	Thiamin (mg)	Riboflavin (mg)	Niacin (mg)	Vitamin C (mg)	Vitamin A
1 Cup 2% milk	8.1	298	0.1	.10	.40	.2	2	500

CLINICAL ASSIGNMENT SHEET #1

MENU	Protein (g)	Calcium (mg)	Iron (mg)	Thiamin (mg)	Riboflavin (mg)	Niacin (mg)	Vitamin C (mg)	Vitamin A
TOTALS								

Add all figures in each column for the day's total intake.

Compare with RDA for adult females, age 23 to 50.

If your figures are below the RDAs, does this mean that your menu is not adequate?

Explain. ____________________

____

Comments: ____________________

____

____

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GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

CLINICAL ASSIGNMENT SHEET #2--COMPARE NUTRITIONAL CONTENT OF FOODS BY INFORMATION ON LABELS

NAME ______________________ SCORE __________

Nutrition labeling acknowledges the shopper's right to know about the nutritional quality of foods. Look at the nutrition facts on the labels of foods you buy. The facts shown there can help you select a good diet for yourself, your family, and/or the patients at your health care facility.

PART I

Use the worksheet below to compare nutritional content of foods by information on the labels.

				Percentage of U. S. RDA						
Food	Amt.	Cal.	Pro.	Vit.A	Vit. C	Thi.	Rib.	Nia.	Cal.	Iron
A. Toasted oat cereal										
Granola										
B. Whole-grain cereal										
Enriched cereal										
C. Whole-wheat bread										
Enriched bread										
D. Fruit juice										
Fruit drink										

CLINICAL ASSIGNMENT SHEET #2

PART II

Compare cost per serving of each item.

EXAMPLE: Method for finding cost per serving

1 box graham cereal @ $2.10
Serving size = 1 oz (from label)
Servings per container = 18 (from label)
Cost divided by number of servings = cost per serving

```
       0.116
  18  )2.100
       1 8
        30
        18
        120
        108
         12
```

Round off $ 0.116
Cost per serving = $ 0.12

A. Toasted oat cereal ____________ Granola ____________

B. Whole-grain cereal ____________ Enriched cereal ____________

C. Whole-wheat bread ____________ Enriched bread ____________

D. Fruit juice ____________ Fruit drink ____________

Comments: ____________

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2--Evaluated to the satisfaction of the clinical instructor

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

TEST

NAME ________________________________ SCORE ________________

1. Match terms associated with guidelines for nutritional adequacy to their correct definitions. Write the correct numbers in the blanks.

_____a. Metric measure of length

_____b. Diet used in the treatment of disease; specific dietary restrictions are part of the remedies for healing

_____c. Metric measure for weight

_____d. Simple statement of principles of Dietary Goals; considered appropriate for most healthy Americans

_____e. Levels of intake of essential nutrients considered to be adequate to meet known nutritional needs of practically all healthy adults

_____f. Metric measure for energy; accepted international unit of energy

_____g. Food groups, including recommended serving sizes, intended to provide a basis for a daily meal plan adequate in nutrients for most healthy individuals

_____h. Groups of food, in specified servings, with similar nutrient and caloric values; this system provides one of the most practical ways of teaching food selection and meal planning

_____i. Standard recommended allowances devised by the United States Food and Drug Administration to meet the needs of nutritional labeling

1. Therapeutic diet
2. Daily Food Guide
3. Recommended Dietary Allowances (RDA)
4. U.S. Recommended Dietary Allowances (U. S. RDA)
5. Dietary Guidelines
6. Food exchange lists
7. Gram
8. Meter
9. Joule

TEST

2. State two purposes of establishing standard guidelines for nutritional adequacy.

a. ____________________

b. ____________________

3. State five of the Dietary Guidelines.

a. ____________________

b. ____________________

c. ____________________

d. ____________________

e. ____________________

4. Distinguish between Daily Food Guide and Dietary Guidelines characteristics. Write an "X" in the correct blanks. Some characteristics may describe both guidelines.

Daily Food Guide	Dietary Guidelines	Characteristics
		a. Originated from the Institute of Home Economics, U.S. Department of Agriculture
		b. Emphasizes food selection
		c. Applies to healthy individuals
		d. Not individualized for specific age and sex groups
		e. Originated from the U.S. Department of Agriculture and U.S. Department of Health and Human Services
		f. Individualized for calories and nutrients for specific age and sex groups
		g. Easy to use

5. Describe one adaptation for each group in the Daily Food Guide to incorporate the Dietary Guidelines.

a. Milk group--____________________

____

b. Meat group--____________________

____

TEST

c. Fruit/vegetable group--______________________________

____

d. Bread/cereal group--______________________________

____

6. Select from the following list characteristics of food exchange lists. Write an "X" in the blank before each correct statement.

_____a. Intended for normal and therapeutic diets

_____b. Emphasize consumption of food, not nutrients

_____c. Developed by the U.S. Department of Agriculture

_____d. Developed by the American Diabetes Association and American Dietetic Association

_____e. Intended for population groups, not individuals

7. Distinguish between Recommended Dietery Allowances and U.S. Recommended Dietary Allowances characteristics. Write an "X" in the correct blanks. Some characteristics may be appropriate to both RDA and U.S. RDA.

RDA	U.S. RDA	Characteristics
		a. Recommendations made for adults and children over four years of age
		b. Intended for healthy populations
		c. Recommendations made for wide variety of population groups
		d. Established by Food and Nutrition Board of National Academy of Sciences, National Research Council
		e. Established by Food and Drug Administration
		f. Recommendations, not requirements
		g. Planned to be met through a diet of a wide variety of foods
		h. Designed for population groups, not individuals

TEST

RDA	U.S. RDA	Characteristics
		i. Emphasizes consumption of nutrients, not food
		j. Standardized for nutritional labeling to permit consumers to compare products
		k. Provides a margin of safety

8. Select from the following list types of information found on nutrition labels. Write an "X" in the blank before each correct answer.

_____a. List of guidelines

_____b. Cost per serving

_____c. Percentage of the U.S. Recommended Dietary Allowances for leader nutrients

_____d. Serving or portion size

_____e. Optional information

_____f. Amount of main nutrients furnished by a specified serving of food as it comes from container

9. Select from the following list information found in 1980 RDA, 9th edition. Write an "X" in the blank before each correct statement.

_____a. Allowances for increased nutrients for pregnant and nursing women

_____b. Allowances for fat

_____c. Allowances for six minerals

_____d. Allowances for five fat-soluble vitamins

_____e. Allowances for protein

_____f. Allowances for carbohydrate

_____g. Allowances for seven water-soluble vitamins

_____h. Allowances for calories

(NOTE: Test questions 10-15 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

10. Analyze food practices.

TEST

11. Calculate height and weight in metric values.
12. Estimate desirable body weight.
13. Calculate approximate caloric needs.
14. Evaluate menu for nutritional adequacy.
15. Compare nutritional content of foods by information on labels.

GUIDELINES FOR NUTRITIONAL ADEQUACY
UNIT III

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 404. The point total for questions 1-9 is 154; the point total for questions 10-15 is 250.)

1. (18 points)

   a. 8

   b. 1

   c. 7

   d. 5

   e. 3

   f. 9

   g. 2

   h. 6

   i. 4

2. (4 points)

   Answer should include any two of the following

   a. To help individuals make appropriate food selections

   b. To evaluate adequacy of intake

   c. To educate persons to importance of good nutrition

3. (10 points)

   Answer should include any five of the following

   a. Eat a variety of foods

   b. Maintain ideal weight

   c. Avoid excessive fat, saturated fat, and cholesterol

   d. Eat food with adequate starch and fiber

ANSWERS TO TEST

e. Avoid excessive sugar

f. Avoid too much sodium

g. If you drink alcohol, do so in moderation

4. (28 points)

Daily Food Guide	Dietary Guidelines	Characteristics
X		a. Originated from the Institute of Home Economics, U.S. Department of Agriculture
X	X	b. Emphasizes food selection
X	X	c. Applies to healthy individuals
	X	d. Not individualized for specific age and sex groups
	X	e. Originated from the U.S. Department of Agriculture and U.S. Department of Health and Human Services
X		f. Individualized for calories and nutrients for specific age and sex groups
X	X	g. Easy to use

5. (8 points)

Answer should include one adaptation for each group

a. Milk group

1) Use skim or low-fat milk and low-fat cheese

2) Limit use of cheeses made from whole milk

3) Use whole milk for small children.

b. Meat group

1) Include no more than 5 ounces of meat, fish, or poultry daily

2) Select lean meats

3) Use fish and poultry more frequently than red meats

ANSWERS TO TEST

4) Limit egg yolks to three or four per week

5) Use dried beans and peas frequently

c. Fruit/vegetable group--Increase intake of this group

d. Bread/cereal group

1) Increase substantially the intake of this group to meet energy needs and to supply iron and B-complex vitamins

2) Emphasize whole grains

6. (10 points)

a, b, d

7. (48 points)

RDA	U.S. RDA	Characteristics
	X	a. Recommendations made for adults and children over four years of age
X	X	b. intended for healthy population
X		c. Recommendations made for wide variety of population groups
X		d. Established by Food and Nutrition Board of National Academy of Sciences, National Research Council
	X	e. Established by Food and Drug Administration
X	X	f. Recommendations, not requirements
X	X	g. Planned to be met through a diet of a wide variety of foods
X		h. Designed for population groups, not individuals
X	X	i. Emphasizes consumption of nutrients, not food
	X	j. Standardized for nutritional labeling to permit consumers to compare products
X	X	k. Provides a margin of safety

ANSWERS TO TEST

8. (12 points)

   c, d, e, f

9. (16 points)

   a, c, e, g, h

10. Evaluated to the satisfaction of the class instructor (50 points)

11. Evaluated to the satisfaction of the class instructor (25 points)

12. Evaluated to the satisfaction of the class instructor (25 points)

13. Evaluated to the satisfaction of the class instructor (25 points)

14. Evaluated to the satisfaction of the clinical instructor (75 points)

15. Evaluated to the satisfaction of the clinical instructor (50 points)

INTRODUCTION TO DIET THERAPY
UNIT IV

UNIT OBJECTIVE

After completing this unit, the student should be able to use a diet manual as a reference. The student should also be able to identify primary nutritional diseases and match common diseases with appropriate diet therapy. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with diet therapy to their correct definitions.
2. State purposes of diet therapy.
3. Describe uses of a diet manual.
4. Name ways that diets can be modified.
5. Identify diseases according to appropriate diet therapy.
6. Match primary nutritional diseases to their correct causes.
7. Locate useful information in the diet manual.
8. Identify foods suitable for an edentulous diet.
9. Identify foods suitable for a 2-gram sodium diet.
10. Identify foods suitable for a liberal diabetic diet.
11. Analyze use of diet manual in your facility.

INTRODUCTION TO DIET THERAPY
UNIT IV

SUGGESTED ACTIVITIES

I. Suggested activities

A. Order materials to supplement unit.

1. Slides

a. *Deficiency Disorders.* 20 slides and syllabus. Available from Nutrition Today, Inc., Educational Services, 703 Giddings Avenue, Annapolis, Maryland 21404.

(NOTE: These slides show classic signs of nutritional deficiencies.)

b. *Hospital Malnutrition.* 44 slides and syllabus. Available from Nutrition Today, Inc., Educational Services, 703 Giddings Avenue, Annapolis, Maryland 21404.

(NOTE: Two authorities, Butterworth and Blackburn, have created a do-it-yourself kit of 17 case-history kodachromes, 18 tables, and 9 charts to help you assess your patients' nutritional status. Kit comes with a pad of 100 nutritional assessment sheets.)

c. *Vitamins and You.* Fifty 35 mm color slides and scripts or 50 slides and synchronized cassette. Available from Vitamin Information Bureau, Inc., 664 North Michigan Avenue, Chicago, Illinois 60611.

2. Wall chart--*Break the Chain of Tooth Decay.* Twelve panels that unfold to make wall chart. Available from Bureau of Dental Health Education, American Dental Association, 211 East Chicago Avenue, Chicago, Illinois 60611.

3. *Vitamin Manual,* 1980. Available from Upjohn Company, 7000 Portage Road, Kalamazoo, Michigan 49001.

B. Make transparencies.

C. Provide students with objective sheet.

D. Discuss unit and specific objectives.

E. Provide students with information and assignment sheets.

F. Discuss information and assignment sheets.

G. Provide medical dictionaries for students to complete Class Assignment Sheet #2.

SUGGESTED ACTIVITIES

H. Develop appropriate learning activities for special needs students.

I. Review "Nutrition in Food Production," *Food Production Worker*, Section A, Unit I.

J. Review "Diet Therapy," *Food Production Worker*, Section A, Unit II.

K. Invite physician to speak to class about clinical nutrient deficiencies he or she has found in practice.

L. Discuss malnutrition that accompanies alcoholism.

M. Invite person with diabetes to speak to class describing the psychological adjustment to being on a modified diet.

N. Give test.

O. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Transparency masters

1. TM #1--Primary Nutritional Diseases
2. TM #2--Cardiovascular System

E. Class assignment sheets

1. Class Assignment Sheet #1--Locate Useful Information in the Diet Manual
2. Class Assignment Sheet #2--Match Types of Conditions to Appropriate Diet Therapies

F. Answers to class assignment sheets

G. Clinical assignment sheets

1. Clinical Assignment Sheet #1--Identify Foods Suitable for an Edentulous Diet
2. Clinical Assignment Sheet #2--Identify Foods Suitable for a 2-Gram Sodium Diet
3. Clinical Assignment Sheet #3--Identify Foods Suitable for a Liberal Diabetic Diet

SUGGESTED ACTIVITIES

4. Clinical Assignment Sheet #4--Analyze Use of Diet Manual in Your Facility

H. Answers to clinical assignment sheets

I. Test

J. Answers to test

III. Unit references

A. American Dietetic Association. *Handbook of Clinical Dietetics.* Hanover, Massachusetts: Yale University Press, 1981.

B. *Dorland's Illustrated Medical Dictionary,* 25th ed. Philadelphia: W.B. Saunders Co., 1974.

C. Livermon, Marjorie, ed. *Oklahoma Diet Manual.* Oklahoma City, Oklahoma: Oklahoma Dietetic Association, 1982.

D. Robinson, Corrine H. *Basic Nutrition and Diet Therapy,* 4th ed. New York: MacMillan Publishing Company, Inc., 1980.

E. Wickham, Sandy J. *Human Nutrition: A Self-Instructional Text*. Bowie, Maryland: Robert J. Brady Co., 1982.

F. Williams, Sue R. *Mowry's Basic Nutrition and Diet Therapy,* 6th ed. St. Louis: C.V. Mosby Company, 1980.

INTRODUCTION TO DIET THERAPY
UNIT IV

INFORMATION SHEET

I. Terms and definitions

A. Malnutrition--Faulty nutrition resulting from poor diet, poor absorption, or overeating

EXAMPLES: Anemia, goiter, rickets, obesity

B. Kwashiorkor--Protein-deficiency disease resulting from diet inadequate in protein but adequate in calories; characterized by edema, weight loss, changes in hair color (Transparency #1)

(NOTE: The Ghanian word *kwashiorkor* means "the sickness the older child gets when next baby is born.")

C. Marasmus--Wasting condition associated with inadequate nutrient and calorie intake; starvation; characterized by "little old man" appearance with sunken cheeks and eyes, extremely thin body, retarded growth (Transparency #1)

D. Goiter--Enlargement of thyroid gland due to iodine deficiency

E. Edema--Abnormal accumulation of fluid in body tissues, producing swelling

(NOTE: Edema is not a disease, but a symptom of disease or the result of an injury.)

F. Osteoporosis--Condition in which bones become porous and brittle; most frequently found in women after menopause

(NOTE: The cause is not known, but low calcium intake over a period of years is implicated, as well as decreased estrogen production and lack of physical activity.)

G. Cardiovascular system--Complex arrangement of heart, arteries, veins, and capillaries through which blood circulates (Transparency #2)

H. Atherosclerosis--Degenerative disease characterized by fatty deposits on the inner walls of the arteries; a natural process of aging

(NOTE: This is commonly called *hardening of the arteries.*)

I. Diabetes mellitus--Metabolic disease involving lack of functioning insulin, which results in high blood-glucose levels

(NOTE: Symptoms are extreme thirst and excessive urination. Eighty percent of people with newly diagnosed diabetes are over fifty years old, and the majority of them are overweight.)

INFORMATION SHEET

J. Dental caries--Tooth decay; the most widespread of human diseases; experienced by over 98 percent of the population

(NOTE: Sticky, sweet foods such as jelly beans, caramels, and chewing gum are most likely to cause tooth decay. The best preventive measure is to brush your teeth after eating, especially after eating sweets.)

K. Diverticulosis--Abnormal condition of colon; small pouches (diverticula) form along lining and protrude through the colon's muscular outer wall

(NOTE: When pouches are filled with waste matter, they can become infected. This is called *diverticulitis.*)

L. Hypertension--High blood pressure

(NOTE: Normal blood pressure is considered to be 120/80, with 120 being the systolic pressure and 80 being the diastolic pressure. Mild hypertension may be said to be present when the diastolic pressure is 90 to 105; moderate hypertension, when the diastolic pressure is 105 to 120; and severe hypertension, when diastolic pressure exceeds 120.)

M. Congestive heart failure (CHF)--Condition in which the heart is not strong enough to keep blood circulating in sufficient quantity to supply body's needs

(NOTE: The lungs and other vital organs become congested due to accumulation of blood.)

N. Febrile disease--Any disease that causes an elevation in body temperature above 98.6°F

(NOTE: For every Fahrenheit-degree rise in temperature, there is a 7 percent increase in basal metabolism, thus an increased need for nutrients.)

II. Purposes of diet therapy (Class Assignment Sheet #2)

A. Providing adequate nutrients, if possible, within diet prescription

B. Increasing or decreasing weight

C. Allowing a particular organ of body to rest

EXAMPLE: Restriction of fat in diseases of gallbladder

D. Planning diet to correspond with body's ability to metabolize a certain nutrient

EXAMPLE: Control of carbohydrates in diabetes mellitus

E. Remedying conditions due to nutrient deficiencies

EXAMPLE: Correcting deficiency of vitamin D in rickets

INFORMATION SHEET

F. Eliminating foods that cause or increase symptoms

EXAMPLE: Avoiding caffeine, alcohol, and pepper in peptic ulcer disease

III. Uses of a diet manual (Class Assignment Sheet #1; Clinical Assignment Sheet #4)

A. Planning

1. Assists medical staff in prescribing diets in accordance with established procedures

2. Allows for tailoring diet prescription to individual's food preferences to greatest possible extent

3. Supplies a variety of useful information needed in health care facility

EXAMPLES: List of food and drug interactions, commonly used abbreviations, laboratory tests and normal values, tables of weights and measures

4. Provides information for patient's home care

(NOTE: When counseling patients, be certain patient understands the diet and its importance to optimal health and well-being, as well as the necessity of changing food habits.)

B. Preparation

1. Provides patterns or guides for dietary department in preparing meals for prescribed diets

2. Provides information to allow for accurate substitutions in modified diets according to established procedures

IV. Ways diets can be modified (Clinical Assignment Sheets #1-#3)

(NOTE: All modified diets are based on normal, well-balanced diets.)

A. Consistency and texture

EXAMPLES: Liquid diet, high-fiber diet

B. Techniques of service and preparation

EXAMPLES: Tube feeding, pureed diet

C. Flavor

EXAMPLE: Diet as tolerated

D. Individual nutrients

EXAMPLES: Low-protein diet, low-fat diet, low-sodium diet

INFORMATION SHEET

E. Caloric value

EXAMPLES: Diabetic diet, reduction diet

F. Content of specific foods

EXAMPLES: Low-cholesterol, gluten-restricted diet, food allergies

(NOTE: Diets can also be modified in combinations, such as low-calorie, low-sodium diet or low-cholesterol, low-sodium diet.)

G. Combinations of these ways

EXAMPLE: Diabetic liquid

V. Diseases and appropriate diet therapy (Class Assignment Sheet #2)

Disease	Appropriate Diet Therapy
Ulcer disease	Diet as tolerated
Gallbladder disease	Fat-restricted diet
Diverticulosis	High-fiber diet
Atherosclerosis	Low-cholesterol diet
Hypertension	Sodium-restricted diet
Congestive heart failure	Sodium-restricted diet
Kidney disease	Protein-sodium-potassium-controlled diet
Diabetes mellitus	Calculated diet
Febrile diseases	Increased-calorie diet
Dental caries	Low-sugar diet

VI. Primary nutritional diseases and their causes(Transparency #1)

A. Malnutrition--Prolonged lack or excess of one or more nutrients or calories

EXAMPLES: Marasmus, kwashiorkor, obesity, hypervitaminosis

B. Rickets--Deficiency of vitamin D

C. Osteoporosis--Low calcium intake over a period of years as a possible contributing factor

INFORMATION SHEET

D. Scurvy--Deficiency of vitamin C

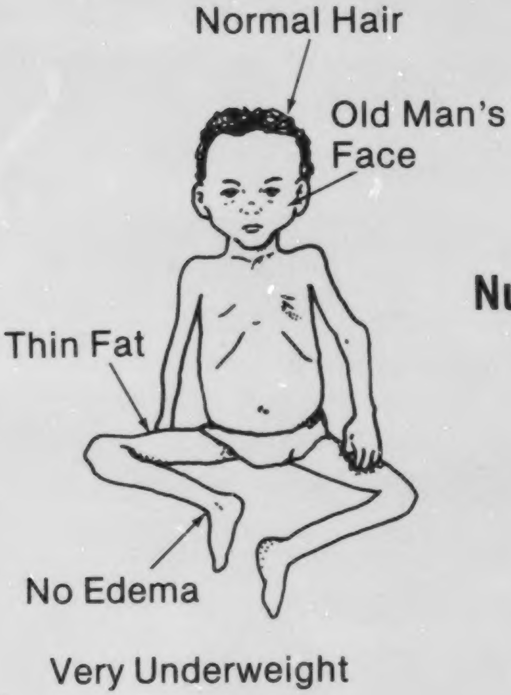
E. Beriberi--Deficiency of thiamin

F. Pellagra--Deficiency of niacin

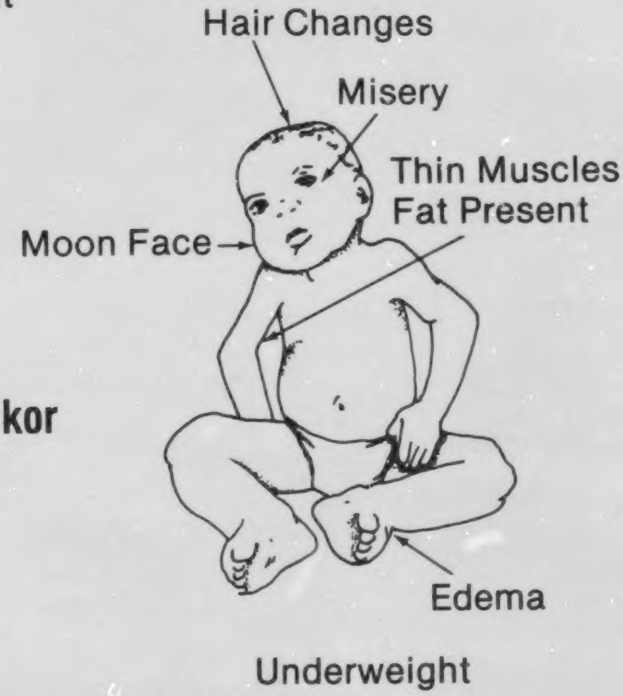
G. Night blindness--Deficiency of vitamin A

H. Nutritional anemia--Deficiency of iron and/or folic acid

Primary Nutritional Diseases

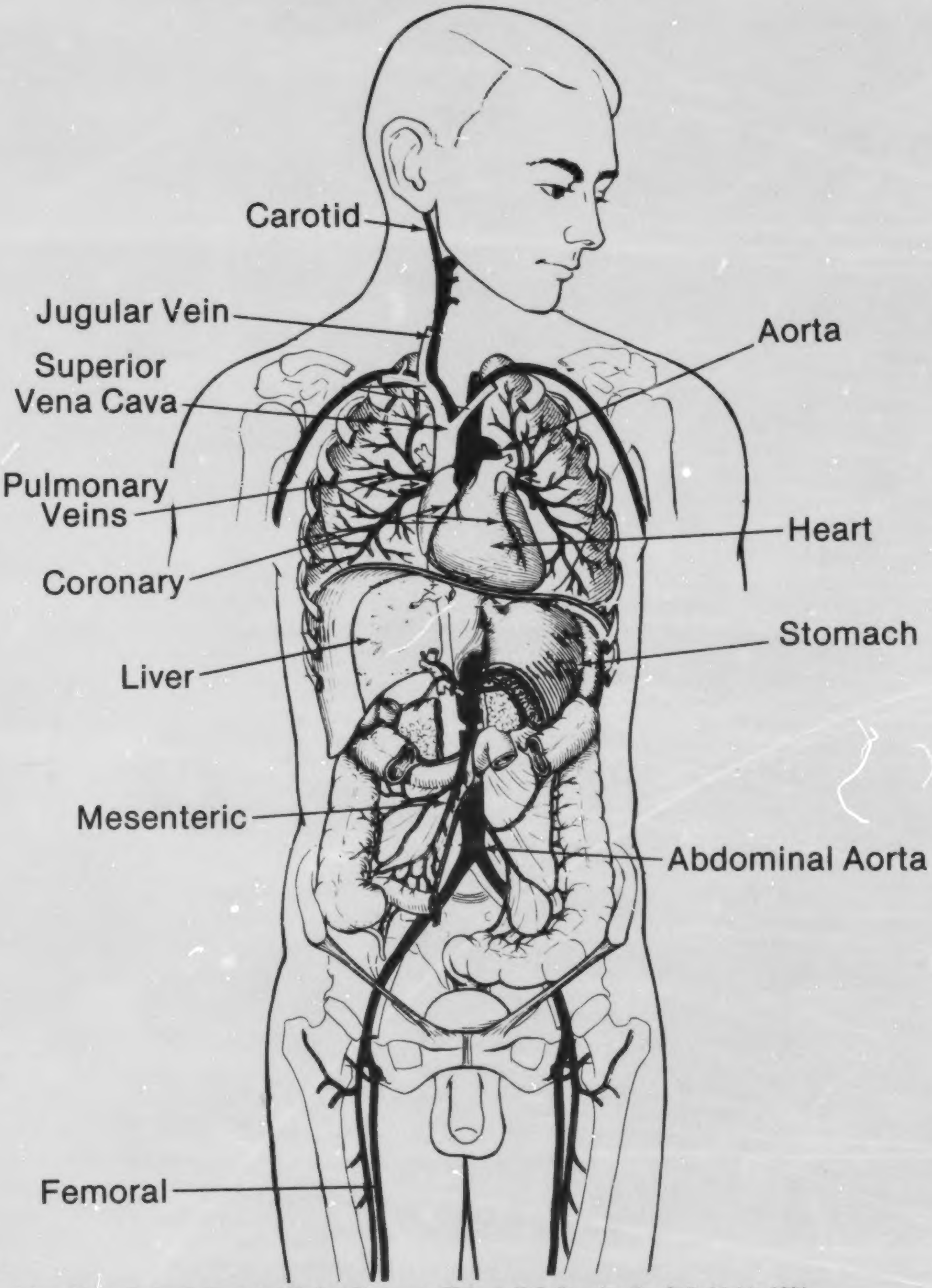

Normal Hair
Old Man's Face
Thin Fat
No Edema
Very Underweight

Nutritional Marasmus


Hair Changes
Misery
Thin Muscles Fat Present
Moon Face
Edema
Underweight

Kwashiorkor

Cardiovascular System


Carotid
Jugular Vein
Superior Vena Cava
Pulmonary Veins
Coronary
Liver
Mesenteric
Femoral
Aorta
Heart
Stomach
Abdominal Aorta

Adapted from *Dorland's Illustrated Medical Dictionary,* 26th ed., W.B. Saunders Co., Philadelphia, 1981.

INTRODUCTION TO DIET THERAPY
UNIT IV

CLASS ASSIGNMENT SHEET #1--LOCATE USEFUL INFORMATION IN THE DIET MANUAL

NAME ______________________________ SCORE ______________

The ability to locate information quickly in the diet manual and make use of it is a valuable asset for the dietetic assistant. Using the diet manual's table of contents and/or index, record the page numbers of the following items in the spaces provided. Locate each item and record one piece of useful information you want to remember. Write this information in the blanks provided.

EXAMPLE: Weights and measures--page M-2; to convert pounds to kilograms, divide pounds by 2.2

Item	Page Number	Useful Information
Food and drug interactions		
Weights and measures		
Test diets		
Vegetarian diet		
Exchange lists		
RDA		
Abbreviations		
Hypoglycemic diet		
Lactose-restricted diet		
Nutrition for cancer patient		
Diet for migraine headache		
Guidelines for individualizing diabetic diet		

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INTRODUCTION TO DIET THERAPY
UNIT IV

CLASS ASSIGNMENT SHEET #2--MATCH TYPES OF CONDITIONS TO APPROPRIATE DIET THERAPIES

NAME ______________________ SCORE ____________

PART I

Using the "Treatment and Rationale" section of the diet manual, list the diseases or conditions for which the following diets are prescribed.

Prescribed Diet	**Conditions treated by diet**
Weight control	1. ____________ 2. ____________
Sodium restricted	1. ____________ 2. ____________ 3. ____________
As tolerated	1. ____________ 2. ____________ 3. ____________
Fat restricted	1. ____________ 2. ____________ 3. ____________
Low cholesterol	1. ____________ 2. ____________ 3. ____________
Protein, sodium, potassium controlled	1. ____________ 2. ____________ 3. ____________
High fiber	1. ____________ 2. ____________ 3. ____________

CLASS ASSIGNMENT SHEET #2

PART II

Using a medical dictionary, look up the names of diseases or conditions in Part I that you are not familiar with. Record the information on this page.

Comments:

INTRODUCTION TO DIET THERAPY
UNIT IV

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1--Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #2--Evaluated to the satisfaction of the class instructor

INTRODUCTION TO DIET THERAPY
UNIT IV

CLINICAL ASSIGNMENT SHEET #1--IDENTIFY FOODS SUITABLE FOR AN EDENTULOUS DIET

NAME ______________________ SCORE ____________

The diet manual provides patterns or guides for use by dietary department employees. Each prescribed diet names specific foods that are allowed and foods that are to be avoided. Learning to identify these foods will be an invaluable tool for the food service supervisor.

Using the diet manual, identify foods in each category for the patient on an edentulous diet.

Food Category	Allow	Avoid
EXAMPLE: Meats	Tender beef	Beef with tough connective tissue
Potato or substitute		
Vegetables		
Fruits		
Breads		
Fats		
Desserts		
Beverages		
Others		

Comments: ______________________

____

INTRODUCTION TO DIET THERAPY
UNIT IV

CLINICAL ASSIGNMENT SHEET #2--IDENTIFY FOODS SUITABLE FOR A 2-GRAM SODIUM DIET

NAME ______________________ SCORE ____________

The diet manual provides patterns or guides for use by dietary department employees. Each prescribed diet names specific foods that are allowed and foods that are to be avoided. Learning to identify these foods will be an invaluable tool for the food service supervisor.

Using the diet manual, identify foods in each category for the patient on a 2-gram sodium diet.

Food Category	**Allow**	**Avoid**
EXAMPLE: Meats	Fresh pork	Cured pork
Potato or substitute		
Vegetables		
Fruits		
Breads		
Fats		
Desserts		
Beverages		
Others		

Comments: ______________________

____

INTRODUCTION TO DIET THERAPY
UNIT IV

CLINICAL ASSIGNMENT SHEET #3--IDENTIFY FOODS SUITABLE FOR A LIBERAL DIABETIC DIET

NAME ______________________________ SCORE ______________

The diet manual provides patterns or guides for use by dietary department employees. Each prescribed diet names specific foods that are allowed and foods to be avoided. Learning to identify these foods will be an invaluable tool for the food service supervisor.

Using the diet manual, identify foods in each category for the patient on a liberal diabetic diet.

Food Category	Allow	Avoid
EXAMPLE: Meats	Baked chicken	Fried chicken
Potato or substitute		
Vegetables		
Fruits		
Breads		
Fats		
Desserts		
Beverages		
Others		

Comments: ____

____

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INTRODUCTION TO DIET THERAPY
UNIT IV

CLINICAL ASSIGNMENT SHEET #4--ANALYZE USE OF DIET MANUAL IN YOUR FACILITY

NAME ______________________________ SCORE ____________

The diet manual contains useful information for every employee of the health care facility. For convenience, a copy should be located in the dietary department and at each of the nursing stations.

Analyze the use of the diet manual in your facility by answering the following questions.

A. What is the approved diet manual in your facility? ______________________

____

B. Has the diet manual been approved in writing by the medical staff? ____________

____

C. Is there a copy of the diet manual at each nursing station? ______________

____

D. Interview the staff to determine who uses the diet manual at the nursing station.

1. Physician(s)? ______________
2. Nurse(s)? ______________
3. Pharmacist? ______________
4. Nurse aide(s)? ______________
5. Dietary employee(s)? ______________
6. Other(s)? ______________

E. Where is the diet manual kept in the dietary department? ______________

F. What dietary personnel use the diet manual? ______________________

______________________ How often? ______________________

G. How do dietary personnel use the diet manual?

1. Food service worker? ______________________________
2. Food production worker? ______________________________
3. Nutrition service worker? ______________________________
4. Food service supervisor? ______________________________
5. Dietetic technician? ______________________________
6. Dietitian? ______________________________

CLINICAL ASSIGNMENT SHEET #4

H. What suggestions do you have for ways to improve the use of the diet manual in your facility? ____

____

INTRODUCTION TO DIET THERAPY
UNIT IV

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #4--Evaluated to the satisfaction of the clinical instructor

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INTRODUCTION TO DIET THERAPY
UNIT IV

TEST

NAME ________________________________ SCORE __________

1. Match terms associated with diet therapy to their correct definitions. Write the correct numbers in the blanks. Definitions are continued on the next page.

_____a. Abnormal accumulation of fluid in body tissues, producing swelling

_____b. Tooth decay; the most widespread of human diseases, experienced by over 98 percent of the population

_____c. Condition in which the heart is not strong enough to keep blood circulating in sufficient quantity to supply body's needs

_____d. Faulty nutrition resulting from poor diet, poor absorption, or overeating

_____e. Metabolic disease involving lack of functioning insulin, which results in high blood-glucose levels

_____f. Protein-deficiency disease resulting from diet inadequate in protein but adequate in calories; characterized by edema, weight loss, changes in hair color

_____g. High blood pressure

_____h. Enlargement of thyroid gland due to iodine deficiency

_____i. Degenerative disease characterized by fatty deposits on the inner walls of the arteries; a natural process of aging

_____j. Abnormal condition of colon; small pouches (diverticula) form along lining and protrude through the colon's muscular outer wall

_____k. Complex arrangement of heart, arteries, veins, and capillaries through which blood circulates

1. Malnutrition
2. Kwashiorkor
3. Congestive heart failure (CHF)
4. Goiter
5. Edema
6. Hypertension
7. Diverticulosis
8. Cardiovascular system
9. Atherosclerosis
10. Diabetes mellitus
11. Dental caries
12. Febrile disease
13. Osteoporosis
14. Marasmus

TEST

______l. Any disease that causes an elevation in body temperature above 98.6°F

______m. Wasting condition associated with inadequate nutrient and calorie intake; starvation; characterized by "little old man" appearance with sunken cheeks and eyes, extremely thin body, retarded growth

______n. Condition in which bones become porous and brittle; most frequently found in women after menopause

2. State three purposes of diet therapy.

   a. ______________________________

   b. ______________________________

   c. ______________________________

3. Describe uses of a diet manual.

   a. Planning--______________________________

   ____

   ____

   b. Preparation--______________________________

   ____

   ____

4. Name four ways that diets can be modified.

   a. ______________________________

   b. ______________________________

   c. ______________________________

   d. ______________________________

TEST

5. Identify diseases according to appropriate diet therapy. Write the name of the correct disease or diseases in the blanks. Blanks may contain more than one answer.

Atherosclerosis
Congestive heart failure
Dental caries
Diabetes mellitus
Diverticulosis
Febrile diseases
Gallbladder disease
Hypertension
Kidney disease
Ulcer disease

______________________________ a. Calculated diet

______________________________ b. Fat-restricted diet

______________________________ c. Sodium-restricted diet

______________________________ d. Diet as tolerated

______________________________ e. Low-sugar diet

______________________________ f. Low-cholesterol diet

______________________________ g. Protein-sodium-potassium-controlled diet

______________________________ h. Increased-calorie diet

______________________________ i. High-fiber diet

6. Match primary nutritional diseases to their correct causes. Write the correct numbers in the blanks.

_____ a. Low calcium intake over a period of years as a possible contributing factor

_____ b. Deficiency of vitamin A

_____ c. Deficiency of vitamin D

_____ d. Deficiency of thiamin

_____ e. Deficiency of niacin

_____ f. Deficiency of iron and/or folic acid

_____ g. Prolonged lack or excess of one or more nutrients or calories

_____ h. Deficiency of vitamin C

1. Malnutrition
2. Rickets
3. Osteoporosis
4. Scurvy
5. Beriberi
6. Pellagra
7. Night blindness
8. Nutritional anemia

TEST

(NOTE: Test questions 7-11 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

7. Locate useful information in the diet manual.
8. Identify foods suitable for an edentulous diet.
9. Identify foods suitable for a 2-gram sodium diet.
10. Identify foods suitable for a liberal diabetic diet.
11. Analyze use of diet manual in your facility.

INTRODUCTION TO DIET THERAPY
UNIT IV

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 279. The point total for questions 1-6 is 89; the point total for questions 7-11 is 190.)

1. (28 points)

    a. 5
    b. 11
    c. 3
    d. 1
    e. 10
    f. 2
    g. 6
    h. 4
    i. 9
    j. 7
    k. 8
    l. 12
    m. 14
    n. 13

2. (9 points)

    Answer should include any three of the following

    a. Providing adequate nutrients, if possible, within diet prescription
    b. Increasing or decreasing weight
    c. Allowing a particular organ of body to rest
    d. Planning diet to correspond with body's ability to metabolize a certain nutrient
    e. Remedying conditions due to nutrient deficiencies
    f. Eliminating foods that cause or increase symptoms

3. (12 points)

    Answer should include the following

    a. Planning
        1) Assists medical staff in prescribing diets in accordance with established procedures
        2) Allows for tailoring diet prescription to individual's food preferences to greatest possible extent

ANSWERS TO TEST

    3) Supplies a variety of useful information needed in health care facility
    4) Provides information for patient's home care

b. Preparation

    1) Provides patterns or guides for dietary department in preparing meals for prescribed diets
    2) Provides information to allow for accurate substitutions in modified diets according to established procedures

4. (4 points)

Answer should include any four of the following

a. Consistency and texture

b. Techniques of service and preparation

c. Flavor

d. Individual nutrients

e. Caloric value

f. Content of specific foods

g. Combinations of these ways

5. (20 points)

a. Diabetes mellitus

b. Gallbladder disease

c. Hypertension, congestive heart failure

d. Ulcer disease

e. Dental caries

f. Atherosclerosis

g. Kidney disease

h. Febrile diseases

i. Diverticulosis

6. (16 points)

a. 3

b. 7

c. 2

d. 5

e. 6

f. 8

g. 1

h. 4

ANSWERS TO TEST

7. Evaluated to the satisfaction of the class instructor (35 points)
8. Evaluated to the satisfaction of the clinical instructor (35 points)
9. Evaluated to the satisfaction of the clinical instructor (35 points)
10. Evaluated to the satisfaction of the clinical instructor (35 points)
11. Evaluated to the satisfaction of the clinical instructor (50 points)

MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

UNIT OBJECTIVE

After completing this unit, the student should be able to use the *Diet Manual* to modify the general menu to fit the physician's diet prescription for specific conditions of the gastrointestinal tract. The student should also be able to specify common foods to allow and to avoid in these diets. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match to their correct definitions terms associated with diets modified for gastrointestinal conditions.
2. Distinguish among types of diets modified for gastrointestinal conditions.
3. Select from a list characteristics of the tonsillectomy diet.
4. Distinguish among characteristics of blenderized tube feedings and commercially prepared formulas.
5. Select from a list characteristics of total parenteral nutrition.
6. Select from a list considerations for planning diets for conditions of the gastrointestinal tract.
7. Distinguish among characteristics of low-fiber and high-fiber diets.
8. Select from a list statements from the American Dietetic Association position paper on bland diet.
9. Select from a list characteristics of the lactose-restricted diet.
10. Select from a list characteristics of the gluten-restricted diet.
11. Compare types of commercially prepared formulas used in health care facilities.
12. Modify general menu to low-fiber and high-fiber diets.
13. Modify general menu to a soft diet.
14. Modify general menu to an edentulous diet.
15. Modify general menu to a pureed diet.
16. Analyze nursing procedure for administration of tube feedings.
17. Calculate blenderized and commercial tube feedings.

MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

SUGGESTED ACTIVITIES

I. Suggested activities

A. Order materials planned to supplement unit.

1. Audio cassette tape/handout programs

a. *Dietitian's Role in Management of the Child with Malabsorption Syndrome.* Tape and 28-page handout, 23 minutes, Communications in Learning, Inc., n.d. Available from Communications in Learning, Inc., 2929 Main Street, Buffalo, New York 14214. Order number 217315.

(NOTE: This program discusses dietary management of children with celiac disease [sprue] and disaccharide intolerance.)

b. *Utilizing Tube Feedings and Elemental Diets in Nutritional Care.* Tape and 6-page handout, 28 minutes, Communications in Learning, Inc., n.d. Available from Communications in Learning, Inc., 2929 Main Street, Buffalo, New York 14214. Order number 217401.

(NOTE: Steps in nutritional care of the tube-fed patient are examined, followed by discussion of elemental diets.)

c. *Hyperalimentation.* Tape and 4-page handout, 40 minutes, Communications in Learning, Inc., n.d. Available from Communications in Learning, Inc., 2929 Main Street, Buffalo, New York 14214. Order number 217511.

(NOTE: This program presents a comprehensive review of the dietitian's role in hyperalimentation therapy with emphasis on metabolic hazards.)

2. Slide/tape/handout programs

a. *Diet Therapy in the Treatment of Peptic Ulcer Disease.* Tape, 11 slides, and 4-page handout, 22 minutes, Communications in Learning, Inc., n.d. Available from Communications in Learning, Inc., 2929 Main Street, Buffalo, New York 14214. Order number 217603.

(NOTE: A survey of 326 hospitals throughout the United States provides a profile of how diet therapy is used in the treatment of peptic ulcer disease. The results of the study show that many popular therapies are ineffective in treating patients.)

SUGGESTED ACTIVITIES

b. *Update on Dietary Fiber.* Tape, 21 slides, and handout, 27 minutes, Communications in Learning, n.d. Available from Communications in Learning, Inc., 2929 Main Street, Buffalo, New York 14214. Order number 217807.

(NOTE: The relationship of fiber to health is poorly understood and is discussed in this presentation.)

c. *Role of Fiber in the Diet.* Tape, 31 slides, and handout, 23 minutes, Communications in Learning, Inc., n.d. Available from Communications in Learning, Inc., 2929 Main Street, Buffalo, New York 14214. Order number 217607.

(NOTE: This program reviews the current evidence on the deficiency of dietary vegetable fiber as a factor in chronic digestive disorders.)

3. Audio cassette tape/filmstrips

a. *Feeding the Patient.* 35 mm, Trainex Corporation, n.d. Available from Trainex Corporation, P.O. Box 116, Garden Grove, California 92642.

(NOTE: This program, which is also available in Audiscan cartridge, LaBelle cartridge, or videotape, illustrates and explains the different types of diets, including a diet for the patient with loose-fitting dentures. Serving food and feeding helpless patients are also discussed.)

b. *Parenteral Hyperalimentation.* 35 mm, Trainex Corporation, n.d. Available from Trainex Corporation, P.O. Box 116, Garden Grove, California 92642.

(NOTE: This filmstrip, which is also available in Audiscan cartridge, LaBelle cartridge, or videotape, explains the need for TPN for critically ill patients. It covers formula prescription and administration, demonstrates a dressing change, emphasizes catheter care, and discusses possible complications.)

4. Film--*Food Follies.* Color, 16 mm, 24 minutes, 1977. Available from University of Illinois Film Center, 1325 Oak Street, Champaign, Illinois 61820.

(NOTE: This film explains and criticizes some of the nutritional information consumers are faced with in the supermarket. Nutrition labeling does not always give an adequate picture of processed foods. Misleading names confuse the issues of calories and ingredient content. The pros and cons of using food additives are assessed.)

SUGGESTED ACTIVITIES

B. Provide students with objective sheet.

C. Provide students with information and assignment sheets.

D. Discuss unit and specific objectives.

E. Discuss information and assignment sheets.

F. Develop appropriate learning activities for special needs students.

G. Review "Diet Therapy," *Food Production Worker,* Section A, Unit II.

H. Review "Digestion and Absorption," *Food Service Supervisor,* Section B, Unit II.

I. Review "Introduction to Diet Therapy," *Food Service Supervisor,* Section B, Unit IV.

J. Exhibit food pump and various feeding tube sizes for class discussion.

K. Have member of TPN team describe procedures to class.

L. Invite outpatient who is receiving TPN at home to talk to class.

M. Discuss advantages and disadvantages of parenteral and enteral feeding.

N. Have students calculate number of calories in average daily IV feeding.

O. Have physician, pharmacist, or IV therapist talk to class about different types of IV solutions and their uses.

P. Have each student interview and compare food tolerances and intolerances of three people with a history of ulcer disease. Share with class.

Q. Give test.

R. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Class Assignment Sheet #1--Complete a Crossword Puzzle on Terms Associated with Diet Modifications for Gastrointestinal Conditions

E. Answers to class assignment sheet

F. Clinical assignment sheets

1. Clinical Assignment Sheet #1--Compare Types of Commercially Prepared Formulas Used in Health Care Facilities

SUGGESTED ACTIVITIES

2. Clinical Assignment Sheet #2--Modify General Menu to Low-Fiber and High-Fiber Diets

3. Clinical Assignment Sheet #3--Modify General Menu to a Soft Diet

4. Clinical Assignment Sheet #4--Modify General Menu to an Edentulous Diet

5. Clinical Assignment Sheet #5--Modify General Menu to a Pureed Diet

6. Clinical Assignment Sheet #6--Analyze Nursing Procedure for Administration of Tube Feedings

7. Clinical Assignment Sheet #7--Calculate Blenderized and Commercial Tube Feedings

G. Answers to clinical assignment sheets

H. Test

I. Answers to test

III. Unit references

A. American Dietetic Association. *Handbook of Clinical Dietetics*. Hanover, Massachusetts: Yale University Press, 1981.

B. Livermon, Marjorie, ed. *Oklahoma Diet Manual*. Oklahoma City, Oklahoma: Oklahoma Dietetic Association, 1982.

C. Robinson, Corrine H. *Basic Nutrition and Diet Therapy*, 4th ed. New York: MacMillan Publishing Company, 1980.

D. Whitney, Eleanor N., et al. *Understanding Nutrition*, 2nd ed. St. Paul, Minnesota: West Publishing Company, 1981.

E. Williams, Sue R. *Mowry's Basic Nutrition and Diet Therapy*, 6th ed. St. Louis, Missouri: C.V. Mosby Company, 1980.

MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

INFORMATION SHEET

I. Terms and definitions (Class Assignment Sheet #1)

A. Adenoidectomy--Surgical removal of adenoids

(NOTE: Adenoids are lymph nodes, similar to tonsils, located in nasal passages. They help block entry of germs to respiratory system.)

B. Anthropometric measurements--Comparative measurements of body; used to assess nutritional status

EXAMPLES: Height, weight, subcutaneous fat (measured by skin-fold calipers)

C. Diarrhea--Frequent passage of liquid or semisolid stools

D. Disaccharide--Sugar molecule composed of two simple sugars

E. Enteral nutrition--Oral or tube feeding that uses gastrointestinal tract

F. Gluten--Insoluble protein of wheat, oats, rye, barley

(NOTE: Gluten gives elastic quality to doughs.)

G. Hernia--Condition in which there is weakening of tissue surrounding part of an organ and a portion of organ bulges at weakest point

(NOTE: Commonly referred to as *rupture*.)

H. Hiatal hernia--Displacement of a portion of stomach through diaphragm muscles and into esophagus

I. Lactase--Enzyme produced in small intestine; breaks down lactose into dextrose and galactose

J. Lactose--Milk sugar; disaccharide found in milk and some dairy products

K. Lumen--Space in interior of tubular structure

EXAMPLE: Space in interior of intestine or artery

L. Sprue--General term given to intestinal malabsorption disorders

M. Tonsillectomy--Surgical removal of tonsils

(NOTE: Tonsils are a collection of lymph tissue in the throat. They assist in removing bacteria from blood.)

INFORMATION SHEET

N. Total parenteral nutrition (TPN)--Method of feeding that provides total nutritional needs for critically ill patients through a very precise solution usually given through a catheter in a central vein

(NOTE: TPN bypasses the gastrointestinal tract.)

II. Types of diets modified for gastrointestinal conditions (Clinical Assignment Sheets #3-#5)

A. Liquid diets

1. Clear liquid

   (NOTE: Clear liquid is also called *surgical liquid*.)

2. Full liquid

3. Tonsillectomy diet

4. Tube feedings

   EXAMPLES: Blenderized tube feeding, commercially prepared formula

5. Total parenteral nutrition (TPN)

B. Soft diets

1. Pureed

   EXAMPLE: Fractured jaw diet

2. Surgical soft

3. Mechanical soft

   (NOTE: Mechanical soft diet is also called *edentulous diet*.)

C. Diets for gastrointestinal conditions

(NOTE: Diseases of the gastrointestinal tract are closely associated with the functions of the organ[s] involved. The following diets are some of the ones most commonly used.)

1. Low fiber

2. High fiber

3. Diet as tolerated

4. Lactose restricted

5. Gluten restricted

INFORMATION SHEET

III. Characteristics of the tonsillectomy diet.

(NOTE: This diet is prescribed for patients following a tonsillectomy or an adenoidectomy. It is also called a *T & A* diet.)

A. Includes food that is chemically, mechanically, and thermally nonirritating to throat

(NOTE: Cool beverages are more easily tolerated than hot. Hot beverages may cause bleeding.)

B. Avoids use of straws

C. Is nutritionally inadequate

(NOTE: The T & A diet should not be used for more than twenty-four to forty-eight hours.)

D. Includes foods such as bland fruit juices, gelatin desserts, carbonated beverages

E. Avoids food such as hot soups, hot beverages, whole-grain cereals

(NOTE: Some physicians do not allow milk or foods containing milk for first twenty-four to forty-eight hours.)

INFORMATION SHEET

IV. Characteristics of blenderized tube feedings and commercially prepared formulas (Clinical Assignment Sheets #1, #6, and #7)

Blenderized Tube Feeding	Commercially Prepared Formula
Mixture of foods liquid enough to pass through gastric tube EXAMPLES: Milk, blended meat, orange juice, enriched baby cereal	Mixture of nutrients liquid enough to pass through gastric tube EXAMPLE: Egg albumin, soy protein, amino acids, nonfat and whole milk solids
Mixture of food that has to be digested and absorbed	Mixture of nutrients of which the majority has to be digested and absorbed
Meets RDA **(CAUTION: Use iron-enriched cereal and vitamin supplement to meet RDA.)**	Meets RDA **(CAUTION: Follow manufacturer's directions on total amount of formula to be given daily.)**
Subject to human error in regulating composition	Ensures constancy of composition
Must be strained	Ready to use
Must be carefully handled to ensure sanitary formula **(CAUTION: Susceptible to bacterial contamination.)** (NOTE: Strict sanitation procedures must be followed during preparation and administration.)	Sanitary (NOTE: May be contaminated after opening.)
Discard after twenty-four hours	Discard after being open twenty-four hours
Gradually adjust amount fed to patient EXAMPLE: First day, one-half dilution; second day, three-fourths strength; third day, full strength	Gradually adjust amount fed to patient EXAMPLE: First day, one-half strength; second day, three-fourths strength; third day, full strength

INFORMATION SHEET

V. Characteristics of total parenteral nutrition

(NOTE: Implementation of this type of feeding requires a specialized team of trained professionals.)

A. Is utilized only when adequate enteral nutrition is not possible for a *significant* period of time

EXAMPLES: Prolonged coma, extensive burns, severe malabsorption

(NOTE: A *significant* period of time is dependent upon individual's age, nutritional status, and disease state.)

B. Provides nutrients in simple forms that do not have to be digested in gastrointestinal tract

EXAMPLES: Glucose, amino acids, vitamins, minerals

(NOTE: Precise knowledge of principles of correct vitamin, mineral, and trace element supplementation is meager. Patient's needs may vary daily.)

C. Meets RDA with careful calculation and frequent monitoring by lab tests

VI. Considerations for planning diets for conditions of the gastrointestinal tract

A. Investigate nutritional status of individual

EXAMPLES: Recent weight loss, following modified diet prescription, diet history

B. Ensure nutritional adequacy of modified diet

C. Record individual's beliefs and tolerances regarding food

D. Make mealtime a pleasant experience

(NOTE: Stress factors such as anxiety, fear, and grief affect digestion and absorption.)

E. Consult with physician or nurse concerning patient's diagnosis

EXAMPLES: Proper secretion of enzymes, gastric juice, and/or bile; good motility and absorption in gastrointestinal tract

INFORMATION SHEET

VII. Low-fiber and high-fiber diet characteristics (Clinical Assignment Sheet #2)

Low-Fiber Diet	High-Fiber Diet
Reduces peristalsis	Increases peristalsis
Increases pressure within lumen of colon	Decreases pressure within lumen of colon
Lengthens transit time for waste material to pass through colon	Shortens length of time waste material remains in colon
Reduces stool formation	Increases frequency of stools
Produces small, dry stools that frequently require straining for elimination from body	Increases stool volume, which makes it easier to eliminate
Lessens irritation and stimulation effect of colon	May increase gas formation in colon

VIII. Statements from the American Dietetic Association position paper on bland diet

(NOTE: *Bland diet* is defined as one that is chemically and mechanically nonirritating.)

A. There is considerable lack of agreement as to which foods are actually nonirritating

(NOTE: Review of diet manuals from many states reveals regional differences as to foods allowed.)

B. There is lack of scientifically supported rationale for restrictions of bland diet

(NOTE: Only a few spices, condiments, highly seasoned foods, alcohol, and drugs actually irritate the gastric mucosa.)

EXAMPLES: Black pepper, chili powder, caffeine, coffee, tea, cocoa

C. Symptoms of food intolerance are related more to individual response to that food than to presence of disease

EXAMPLE: Some ulcer patients can tolerate cooked cabbage, others cannot.

D. When they are well-chewed and mixed with saliva, foods high in fiber do not irritate ulcers

INFORMATION SHEET

E. Patients with ulcers should be on an as-tolerated diet

EXAMPLE: Consider specific food intolerances of the individual.

(NOTE: Small volume and frequent feedings are advocated to reduce acidity in the stomach.)

IX. Characteristics of the lactose-restricted diet

(NOTE: This diet is prescribed for patients who have lactose intolerance. These patients do not have sufficient lactase [intestinal enzyme] to digest lactose.)

A. Relieves symptoms of lactose intolerance

EXAMPLES: Abdominal cramps, distension, diarrhea

(NOTE: These symptoms are caused by undigested lactose fermenting in the intestine.)

B. Includes fermented dairy products as tolerated

EXAMPLES: Cheese, buttermilk, yogurt

(NOTE: In fermented dairy products, some or all of the lactose has been converted to lactic acid.)

C. Avoids dairy products containing lactose

EXAMPLES: Milk, creamed foods, ice cream

X. Characteristics of the gluten-restricted diet

(NOTE: This diet is prescribed for patients with chronic inflammation of the intestine associated with sensitivity to gluten. This is a lifelong malabsorption disorder that results in malnutrition if not treated.)

A. Relieves symptoms of gluten sensitivity

EXAMPLES: Poor absorption of food, especially fat; diarrhea with high fat content in stools

B. Includes well-tolerated grains

EXAMPLES: Arrowroot, rice, corn, soybean

(NOTE: Low-gluten wheat flour and potato flour are available and are well tolerated by these patients.)

C. Avoids high-gluten grains

EXAMPLES: Wheat, oats, rye, barley

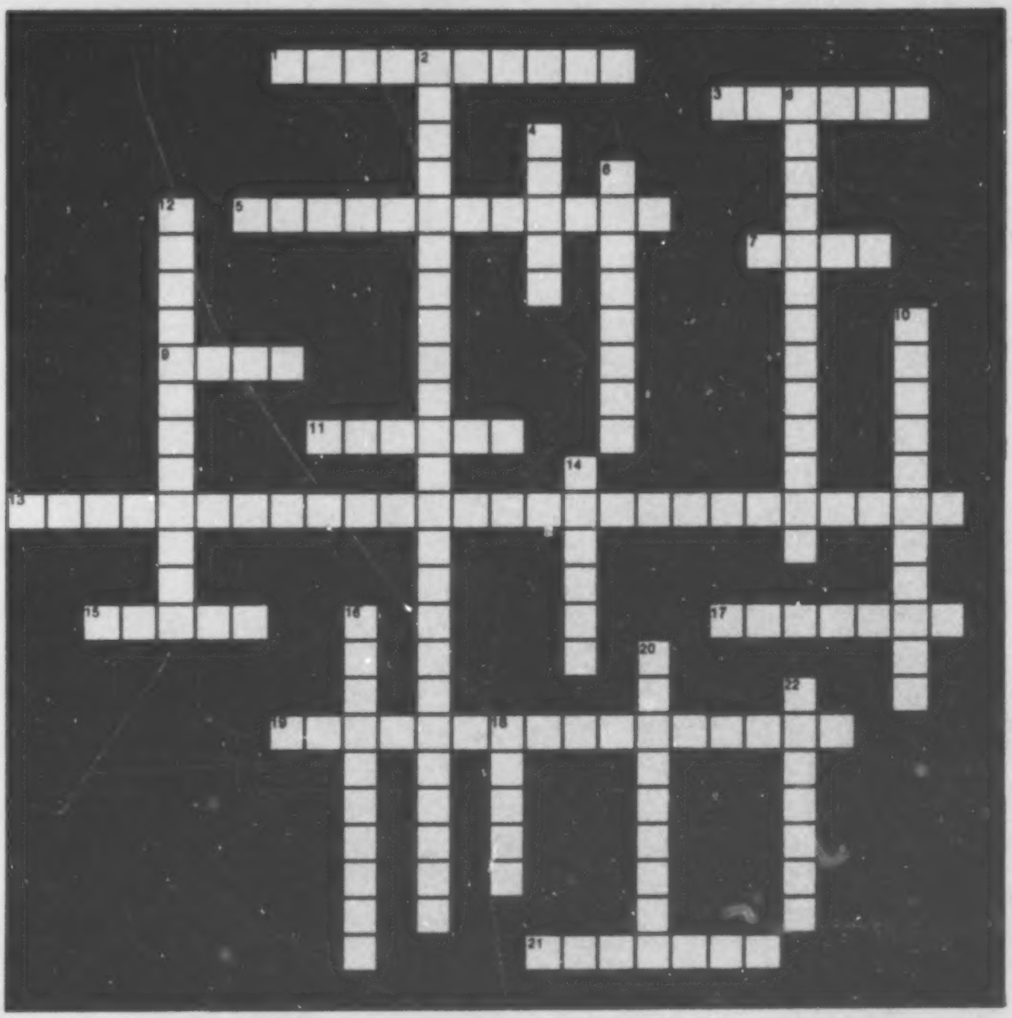
(CAUTION: Malt from barley is also high gluten and must be avoided.)

MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

CLASS ASSIGNMENT SHEET #1--COMPLETE A CROSSWORD PUZZLE ON TERMS ASSOCIATED WITH DIET MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS

NAME ______________________________________ SCORE ________________

To be an effective food service supervisor, you must understand the terms associated with diets modified for gastrointestinal conditions. Familiarize yourself with the vocabulary by using the clues on the following page to complete the crossword puzzle below.



CLASS ASSIGNMENT SHEET #1

ACROSS

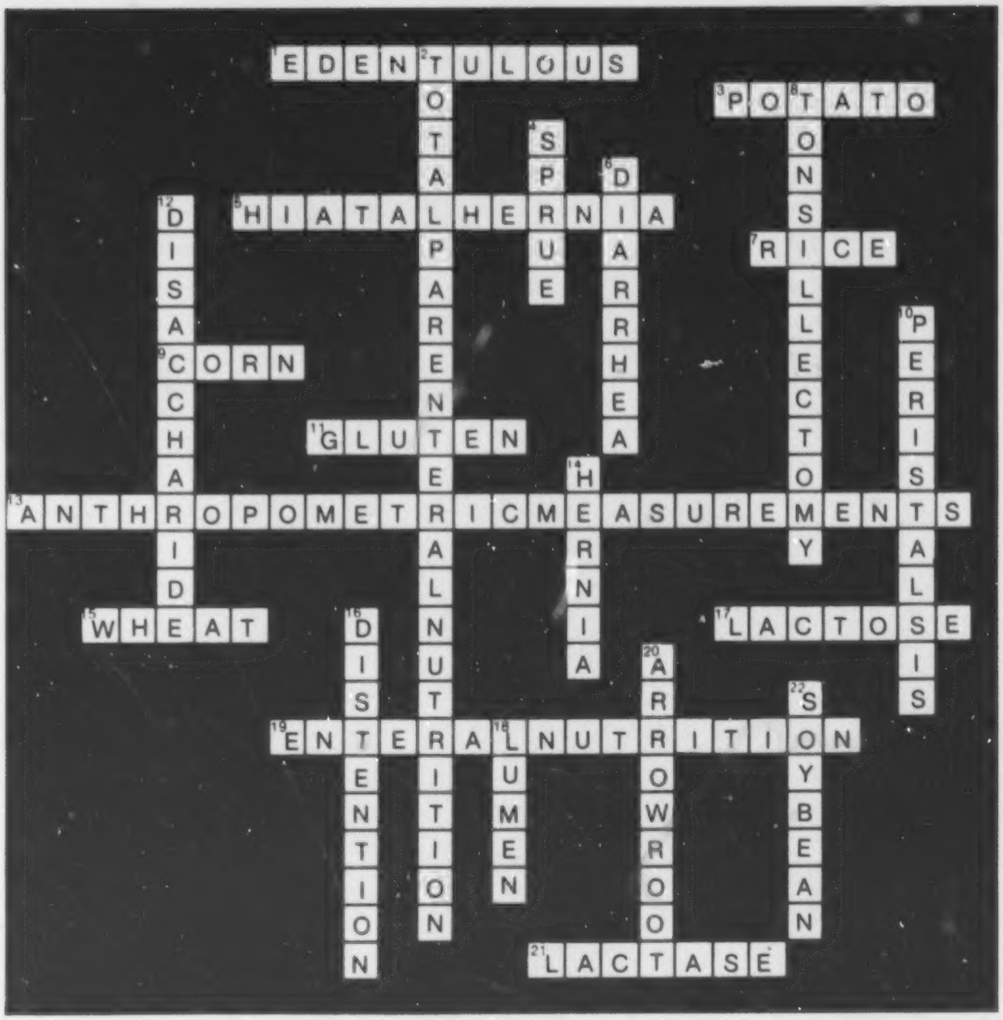
1. Without teeth
3. Low-gluten food
5. Displacement of a portion of stomach through diaphragm muscles and into esophagus (2 wds.)
7. Low-gluten food
9. Low-gluten food
11. Insoluble protein of wheat, oats, rye, barley
13. Comparative measurements of body; used to assess nutritional status (2 wds.)
15. High-gluten grain
17. Milk sugar; disaccharide found in milk and some dairy products
19. Oral or tube feeding that uses gastrointestinal tract (2 wds.)
21. Enzyme produced in small intestine; breaks down lactose into dextrose and galactose

DOWN

2. Method of feeding that provides total nutritional needs for critically ill patients through a very precise solution usually given through a catheter in a central vein (3 wds.)
4. General term given to intestinal malabsorption disorders
6. Frequent passage of liquid or semisolid stools
8. Surgical removal of tonsils
10. Peculiar, wavelike motion of intestines produced by contraction of muscular walls; used to move food contents along tube
12. Sugar molecule composed of two simple sugars
14. Condition where there is weakening of tissue surrounding part of an organ and a portion of organ bulges at weakest point
16. Bloating
18. Space in interior of tubular structure
20. Low-gluten food
22. Low-gluten food

MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

ANSWERS TO CLASS ASSIGNMENT SHEET


1 EDENTULOUS
2 TOTALPARENTERALNUTRITION
3 POTATO
4 SPRUE
5 HIATALHERNIA
6 DIARRHEA
7 RICE
8 TONSILLECTOMY
9 CORN
10 PERISTALSIS
11 GLUTEN
12 DISACCHARIDE
13 ANTHROPOMETRICMEASUREMENTS
14 HERNIA
15 WHEAT
16 DISTENTION
17 LACTOSE
18 LUMEN
19 ENTERALNUTRITION
20 ARROWROOT
21 LACTASE
22 SOYBEAN

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MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

CLINICAL ASSIGNMENT SHEET #1--COMPARE TYPES OF COMMERCIALLY PREPARED FORMULAS USED IN HEALTH CARE FACILITIES

NAME ______________________________ SCORE ________________

There are many commercially prepared formulas on the market. To select the right formula for a specific patient, comparisons must be made.

PART I

Use the *Diet Manual*, and list the differences in the products available in your health care facility.

Name	Protein Source	Fat Source	CHO Source	Calories	Sodium	Characteristics (include cost/serv.)

CLINICAL ASSIGNMENT SHEET #1

PART II

A. Which formula(s) would be suitable to serve patients on a sodium-restricted diet?

____

Why? ______________________________________

B. Which formula(s) would be suitable to serve patients on a diabetic diet?

____

Why? ______________________________________

C. Which formula(s) can be served as oral feeding?

____

D. Which formula(s) cannot be served as oral feeding because of taste?

____

E. Are these formulas ever served as supplements between meals? ____________

F. How do the patients accept them? ____________________________

____

G. What is the average daily cost of formulas used in your facility? ____________

Comments: ___________________________________

____

____

____

____

____

____

____

____

____

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MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

CLINICAL ASSIGNMENT SHEET #2–MODIFY GENERAL MENU TO LOW-FIBER AND HIGH-FIBER DIETS

NAME ______________________ SCORE ____________

Modifying the general menu to fit the physician's diet prescription is an important aspect of the job of the food service supervisor. The normal diet is the basis for all modifications, and the goal is to make each modified diet as good as the general diet.

To simplify the work of food service employees, keep as many similar foods as possible. Write the general menu for one day in your facility. Modify the general diet to a low-fiber diet, and a high-fiber diet. Use the *Diet Manual* as reference for foods to allow and foods to avoid on each diet.

General Diet	Low Fiber	High Fiber
BREAKFAST		
EXAMPLE: Orange juice	Orange juice	Fresh orange
LUNCH		

CLINICAL ASSIGNMENT SHEET #2

General diet **Low Fiber** **High Fiber**

SUPPER

____

____

____

____

____

____

____

____

SNACK

____

____

____

____

Comments:

____

____

____

____

(NOTE: Milk contains no dietary fiber, but the lactose in milk is favorable to the growth of certain types of bacteria in intestine, which produce residues. Milk is limited to two cups a day on the low-fiber diet.)

MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

CLINICAL ASSIGNMENT SHEET #3 MODIFY GENERAL MENU TO A SOFT DIET

NAME ______________________ SCORE __________

Modifying the general menu to fit the physician's diet prescription is an important aspect of the job of the food service supervisor. You must learn to incorporate the principles listed in the *Diet Manual* while including the patient's food preferences as much as possible. Always consider the work load of the food service employees, and keep the meals as simple as possible. Many factors have to be considered.

PART I

A. Visit a patient who is on a soft diet.

B. Explain diet order to patient, including foods to allow and foods to avoid.

C. List food preferences, allergies or intolerances, and ability to chew and swallow.

CLINICAL ASSIGNMENT SHEET #3

PART II

Write the general diet for one day in your facility. Modify it to suit the patient you visited on a soft diet. Use the *Diet Manual* as reference.

General Diet	Soft Diet

BREAKFAST

LUNCH

CLINICAL ASSIGNMENT SHEET #3

General Diet	Soft Diet
SUPPER	
SNACK	

PART III

Visit this patient one or two days later for follow-up. How can the diet be adjusted for better acceptance?

CLINICAL ASSIGNMENT SHEET #3

Comments:

MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

CLINICAL ASSIGNMENT SHEET #4 MODIFY GENERAL MENU TO AN EDENTULOUS DIET

NAME ______________________ SCORE __________

An edentulous diet must be individualized to the patient. Each person without teeth has different abilities in eating. For example, one patient may require applesauce and another can eat a raw apple. This cannot be determined by reading the diet order. You must visit each patient. Individualize the diet around food preferences, food tolerances, and any special needs of the patient.

PART I

A. Visit a patient who is on an edentulous diet.

B. List food preferences, allergies or intolerances, and ability to chew and swallow.

____

____

____

____

____

____

CLINICAL ASSIGNMENT SHEET #4

PART II

Write the general diet for one day in your facility. Modify it to suit the specific edentulous patient you visited. Specify food preparation techniques if applicable.

EXAMPLE: Blended meat or chopped meat in gravy

General Diet	Individualized Edentulous Diet
BREAKFAST	
____________________	____________________
____________________	____________________
____________________	____________________
____________________	____________________
____________________	____________________
____________________	____________________
____________________	____________________
____________________	____________________
LUNCH	
____________________	____________________
____________________	____________________
____________________	____________________
____________________	____________________
____________________	____________________
____________________	____________________
____________________	____________________
____________________	____________________

CLINICAL ASSIGNMENT SHEET #4

General Diet	Individualized Edentulous Diet

SUPPER

SNACK

PART III

Visit this patient again in one or two days for follow-up. How can the diet be adjusted for better acceptance?

CLINICAL ASSIGNMENT SHEET #4

Comments:

MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

CLINICAL ASSIGNMENT SHEET #5 -MODIFY GENERAL MENU TO A PUREED DIET

NAME ______________________________ SCORE ______________

The pureed diet order should be treated as carefully as the edentulous diet order. Each patient should be treated as an individual, with attention to particular abilities and food preferences. Visit the patient and obtain these vital facts. If the patient is unable to talk, visit the nurse's aide who is responsible for feeding the individual. The aides are good sources of information. Encourage teamwork among all departments in your facility.

PART I

A. Visit a patient who is on a pureed diet.

B. Explain diet order to patient.

(NOTE: If the patient is alert, explain that you take the food prepared for the general diet and put it in the blender to modify the consistency. Ask the patient to taste the food before rejecting it. Sometimes pureed food does not look appetizing, but the taste is good. An explanation to the patient and the nurse's aide responsible for feeding will increase food acceptance.)

C. List food preferences, allergies or intolerances, and ability to chew and swallow.

(NOTE: Remember, stroke victims find it easier to swallow thicker liquids, such as milkshakes, than thin ones, such as juices.)

D. What are appropriate serving sizes? ______________________________

E. How can you make the tray more attractive? ______________________________

CLINICAL ASSIGNMENT SHEET #5

PART II

Write the general diet for one day in your facility. Then modify the diet to suit a specific patient on a pureed diet.

General Diet	Individualized Pureed Diet
BREAKFAST	
LUNCH	
SUPPER	

CLINICAL ASSIGNMENT SHEET #5

SNACK

________________ ________________

________________ ________________

PART III

Visit this patient again in one or two days for follow-up. How can the diet be adjusted for better acceptance?

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Comments:

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MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

CLINICAL ASSIGNMENT SHEET #6–ANALYZE NURSING PROCEDURE FOR ADMINISTRATION OF TUBE FEEDINGS

NAME ______________________________ SCORE ______________

It is the responsibility of the dietary department to properly prepare the tube feeding. Tube feedings are delivered to the nursing staff with the correct nutrients and free of contamination. For the patient to receive maximum benefit, the feeding must be given correctly.

Using the following information from the *Diet Manual,* analyze the nursing procedure for administration of tube feedings in your facility. Ask one of the nurses to help you with this assignment.

A. Does the procedure indicate that any remaining formula is to be discarded after twenty-four hours? ______________________

(NOTE: Each container of tube feeding should come from the dietary department carefully labeled with patient's name, room number, date, and hour of preparation.)

B. Is the container airtight? ______________________

C. Has the feeding been properly refrigerated? ______________________

(NOTE: Commercially prepared formulas can be stored at room temperature until opened. After opening, they must be refrigerated.)

D. To feed patient, remove just the amount to be fed and warm to room temperature over hot water. Is this in the written procedure? ______________________

(NOTE: Feeding a solution that is too cold is one of the major causes of nausea, vomiting, cramps, and diarrhea.)

E. Does the procedure remind the nurse to shake the formula well before using? ______________________

F. What is the procedure for diluting the feeding the first few days to allow the patient to adjust? Does the dietary department mix it half-strength dilution the first day? Or do the nurses dilute it before administration? ______________________

This should be written in the procedure so there is no misunderstanding.

G. How much is given at each feeding? ______________________

H. How often? ______________________

CLINICAL ASSIGNMENT SHEET #6

I. Does the procedure indicate the need to add water to the tube at the end of each feeding? ____________________ How much water? ____________

J. Are the patient's fluid requirements considered in the procedure? ____________

K. Is the formula to be administered by gravity? ____________ Food pump? ____________

L. Is the flow rate indicated? ____________

(NOTE: Feedings should be given slowly to avoid distention, nausea, and excessive peristalsis, which can cause diarrhea.)

M. Does the procedure include steps for the unconscious tube-fed patient? ____________

(NOTE: A suction apparatus should be available.)

N. Are the psychological needs of the patient considered? ____________

(NOTE: If the patient is conscious, explain why a tube feeding is necessary and what foods are included in it.)

Comments:

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MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

CLINICAL ASSIGNMENT SHEET #7--CALCULATE BLENDERIZED AND COMMERICIAL TUBE FEEDINGS

NAME ______________________________ SCORE ______________

As a food service supervisor, you need to be capable of calculating tube feedings to meet the physician's prescription. Ordinarily, the doctor will order tube feedings by daily calories. Using the *Diet Manual* as a guide, and with the supervision of your dietitian, calculate a tube feeding by alternate methods. Write your answers in the space provided.

PART I--Blenderized tube feeding

Calculate specific foods and amounts needed to make blenderized tube feeding of 1,800 calories per day and 1,800 cubic centimeters per day

FOOD	AMOUNT

COST PER DAY ______________

PART II--Commercially prepared formula to provide 1,800 calories per day

NAME OF PRODUCT ______________

AMOUNT PER DAY ______________

COST PER DAY ______________

Comments:

MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #4--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #5--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #6--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #7--Evaluated to the satisfaction of the clinical instructor

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MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

TEST

NAME ________________________________ SCORE ______________

1. Match to their correct definitions terms associated with diets modified for gastrointestinal conditions. Write the correct numbers in the blanks.

_____a. Comparative measurements of body; used to assess nutritional status

_____b. Condition in which there is weakening of tissue surrounding part of an organ and a portion of organ bulges at weakest point

_____c. Oral or tube feeding that uses gastrointestinal tract

_____d. Surgical removal of tonsils

_____e. Frequent passage of liquid or semisolid stools

_____f. Milk sugar; disaccharide found in milk and some dairy products

_____g. General term given to intestinal malabsorption disorders

_____h. Space in interior of tubular structure

_____i. Surgical removal of adenoids

_____j. Displacement of a portion of stomach through diaphragm muscles and into esophagus

_____k. Method of feeding that provides total nutritional needs for critically ill patients through a very precise solution usually given through a catheter in a central vein

_____l. Sugar molecule composed of two simple sugars

_____m. Insoluble protein of wheat, oats, rye, barley

_____n. Enzyme produced in small intestine; breaks down lactose into dextrose and galactose

1. Tonsillectomy
2. Adenoidectomy
3. Total parenteral nutrition (TPN)
4. Enteral nutrition
5. Lactose
6. Disaccharide
7. Lactase
8. Diarrhea
9. Hiatal hernia
10. Hernia
11. Gluten
12. Sprue
13. Anthropometric measurements
14. Lumen

TEST

2. Distinguish among types of diets modified for gastrointestinal conditions. Write an "L" in the blanks before liquid diets, an "S" in the blanks before soft diets, and "GI" in the blanks before diets for gastrointestinal conditions.

______a. Tube feedings

______b. Mechanical soft

______c. Tonsillectomy diet

______d. Gluten restricted

______e. Low fiber

______f. Pureed

______g. Diet as tolerated

______h. Surgical soft

______i. Full liquid

______j. Total parenteral nutrition (TPN)

______k. High fiber

______l. Lactose restricted

______m. Clear liquid

3. Select from the following list characteristics of the tonsillectomy diet. Write an "X" in the blank before each correct answer.

______a. Is nutritionally adequate

______b. Includes food that is chemically, mechanically, and thermally nonirritating to throat

______c. Includes use of straws

______d. Is used for at least one week following surgery

______e. Includes foods such as bland fruit juices, gelatin desserts, carbonated beverages

______f. Avoids foods such as hot soups, hot beverages, whole-grain cereals

TEST

4. Distinguish among characteristics of blenderized tube feedings and commercially prepared formulas. Write an "X" in the column below *blenderized* if the characteristic listed is correct for blenderized tube feedings. Write an "X" in the column below *commercial* if the characteristic listed is correct for commercially prepared formulas. Some characteristics may be appropriate for both.

Blenderized	**Commercial**	**Characteristics**
		a. Meets RDA
		b. Sanitary
		c. Mixture of food that has to be digested and absorbed
		d. Mixture of foods liquid enough to pass through gastric tube
		e. Discard after twenty-four hours
		f. Ensures constancy of composition
		g. Mixture of nutrients of which the majority has to be digested and absorbed
		h. Discard after being open twenty-four hours
		i. Gradually adjust amount fed to patient
		j. Mixture of nutrients liquid enough to pass through gastric tube
		k. Must be carefully handled to ensure sanitary formula
		l. Subject to human error in regulating composition
		m. Ready to use
		n. Must be strained

5. Select from the following list characteristics of total parenteral nutrition. Write an "X" in the blank before each correct statement.

_____a. Is preferred over enteral nutrition

_____b. Meets RDA with careful calculation and frequent monitoring by lab tests

_____c. Is utilized only when adequate enteral nutrition is not possible for a *significant* period of time

_____d. Provides nutrients in complex forms that have to be digested in gastrointestinal tract

TEST

6. Select from the following list considerations for planning diets for conditions of the gastointestinal tract. Write an "X" in the blank before each correct answer.

_____a. Record individual's beliefs and tolerances regarding food

_____b. Provide patient with instructions for using antacids

_____c. Encourage patient to discuss family problems at mealtime

_____d. Investigate nutritional status of individual

_____e. Consult with physician or nurse concerning patient's diagnosis

_____f. Always omit foods that are coarse or fibrous

_____g. Ensure nutritional adequacy of modified diet

7. Distinguish among characteristics of low-fiber and high-fiber diets. Write an "X" in the column below *low fiber* if the characteristic listed is correct for low-fiber diet. Write an "X" in the column below *high fiber* if the characteristic listed is correct for high-fiber diet.

Low Fiber	High Fiber	Characteristic
		a. Increases frequency of stools
		b. Reduces peristalsis
		c. Lessens irritation and stimulation effect of colon
		d. Increases pressure within lumen of colon
		e. Shortens length of time waste material remains in colon
		f. Lengthens transit time for waste material to pass through colon
		g. Increases peristalsis
		h. Produces small, dry stools that frequently require straining for elimination from body
		i. May increase gas formation in colon
		j. Decreases pressure within lumen of colon
		k. Reduces stool formation
		l. Increases stool volume, which makes it easier to eliminate

TEST

8. Select from the following list statements from the American Dietetic Association position paper on bland diet. Write an "X" in the blank before each correct answer.

_____a. All authorities agree on which foods are actually nonirritating

_____b. Patients with ulcers should be on a bland diet

_____c. Symptoms of food intolerance are related more to individual response to that food than to presence of disease

_____d. There is lack of scientifically supported rationale for restrictions of bland diet

_____e. When they are well-chewed and mixed with saliva, foods high in fiber irritate ulcers

_____f. Patients with ulcers should drink large quantities of whole milk

9. Select from the following list characteristics of the lactose-restricted diet. Write an "X" in the blank before each correct answer.

_____a. Avoids all dairy products

_____b. Includes fermented dairy products as tolerated

_____c. Relieves symptoms of lactose intolerance

_____d. Avoids dairy products containing lactose

10. Select from the following list characteristics of the gluten-restricted diet. Write an "X" in the blank before each correct answer.

_____a. Relieves symptoms of gluten sensitivity

_____b. Includes well-tolerated grains such as wheat, oats, rye, and barley

_____c. Avoids high-gluten grains

_____d. Cures gluten sensitivity when used with proper medication

(NOTE: Test questions 11-17 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

11. Compare types of commercially prepared formulas used in health care facilities.

12. Modify general menu to low-fiber and high-fiber diets.

13. Modify general menu to a soft diet.

14. Modify general menu to an edentulous diet.

15. Modify general menu to a pureed diet.

16. Analyze nursing procedure for administration of tube feedings.

17. Calculate blenderized and commercial tube feedings.

MODIFICATIONS FOR GASTROINTESTINAL CONDITIONS
UNIT V

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 380. The point total for question 1-10 is 160; the point total for questions 11-17 is 220.)

1. (28 points)

   a. 13
   b. 10
   c. 4
   d. 1
   e. 8
   f. 5
   g. 12
   h. 14
   i. 2
   j. 9
   k. 3
   l. 6
   m. 11
   n. 7

2. (26 points)

   a. L
   b. S
   c. L
   d. GI
   e. GI
   f. S
   g. GI
   h. S
   i. L
   j. L
   k. GI
   l. GI
   m. L

3. (12 points)

   b, e, f

ANSWERS TO TEST

4. (28 points)

Blenderized	Commercial	Characteristic
X	X	a. Meets RDA
	X	b. Sanitary
X		c. Mixture of foods that has to be digested and absorbed
X		d. Mixture of foods liquid enough to pass through gastric tube
X		e. Discard after twenty-four hours
	X	f. Ensures constancy of composition
	X	g. Mixture of nutrients of which the majority has to be digested and absorbed
	X	h. Discard after being open twenty-four hours
X	X	i. Gradually adjust amount fed to patient
	X	j. Mixture of nutrients liquid enough to pass through gastric tube
X		k. Must be carefully handled to ensure sanitary formula
X		l. Subject to human error in regulating composition
	X	m. Ready to use
X		n. Must be strained

5. (8 points)

b, c

6. (14 points)

a, d, e, g

ANSWERS TO TEST

7. (16 points)

Low Fiber	High Fiber	Characteristic
	X	a. Increases frequency of stools
X		b. Reduces peristalsis
X		c. Lessens irritation and stimulation effect of colon
X		d. Increases pressure within lumen of colon
	X	e. Shortens length of time waste material remains in colon
X		f. Lengthens transit time for waste material to pass through colon
	X	g. Increases peristalsis
X		h. Produces small, dry stools that frequently require straining for elimination from body
	X	i. May increase gas formation in colon
	X	j. Decreases pressure within lumen of colon
X		k. Reduces stool formation
	X	l. Increases stool volume, which makes it easier to eliminate

8. (12 points)

c, d

9. (8 points)

b, c, d

10. (8 points)

a, c

ANSWERS TO TEST

11. Evaluated to the satisfaction of the clinical instructor (25 points)

12. Evaluated to the satisfaction of the clinical instructor (50 points)

13. Evaluated to the satisfaction of the clinical instructor (25 points)

14. Evaluated to the satisfaction of the clinical instructor (25 points)

15. Evaluated to the satisfaction of the clinical instructor (25 points)

16. Evaluated to the satisfaction of the clinical instructor (20 points)

17. Evaluated to the satisfaction of the clinical instructor (50 points)

MODIFICATIONS IN MINERALS
UNIT VI

UNIT OBJECTIVE

After completing this unit, the student should be able to list functions of minerals in the body. The student should also be able to modify a menu from regular to 2 grams of sodium, and plan a menu for a controlled protein, sodium, and potassium diet. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match to their correct definitions terms associated with modifications in minerals.
2. Select from a list functions of minerals in the body.
3. Name minerals that require special attention in a healthy person's diet.
4. Distinguish between macronutrients and micronutrients.
5. Identify conditions that may require modification in mineral and/or protein content of diet.
6. Distinguish between sodium and potassium characteristics.
7. Distinguish among foods to use and foods to avoid for a 2-gram sodium diet.
8. Distinguish among foods to use and foods to avoid for a renal disease diet.
9. Name other mineral modifications in diet therapy.
10. Calculate the sodium content of a menu.
11. Modify a general menu to 2 grams of sodium.
12. Plan a menu for controlled protein, sodium, and potassium diet.
13. Make recommendations to increase the iron content of a menu.

MODIFICATIONS IN MINERALS
UNIT VI

SUGGESTED ACTIVITIES

I. Suggested activities

A. Order materials to supplement unit.

1. Filmstrips

a. *Living with a Low Sodium Diet.* Color, 35 mm filmstrip/cassette, Robert J. Brady Company, 1981. Available from Robert J. Brady Company, Bowie, Maryland 20715.

(NOTE: This filmstrip explains the relationship between excess sodium, fluid retention, and increased blood volume circulation; explains the action of diuretics; reveals the "hidden" sodium content of commercially prepared foods; and describes a well-balanced, low-sodium diet.)

b. *Low Sodium Diet.* Color, 35 mm filmstrip/cassette, Eye Gate Media, Inc., 1980. Available from Eye Gate Media, Inc., 146-01 Archer Avenue, Jamaica, New York 11435.

(NOTE: This filmstrip is an in-depth presentation aimed at the sodium-restricted patient. It explains why the diet is necessary and what it accomplishes, and covers all parameters of low-sodium intake, from a mildly restrictive diet to a severely restricted diet.)

2. Flipchart — *High Blood Pressure.* Robert J. Brady Company, 1981. Available from Robert J. Brady Company, Bowie, Maryland 20715.

(NOTE: This chart emphasizes the positive aspects of controlling hypertension through the use of therapy and proper medicines. It illustrates the importance of low-sodium diets, controlling weight and stress, regular exercise, and refraining from smoking.)

3. Sodium comparison charts — Color, Nutrition Graphics, 1980. Available from Nutrition Graphics, P. O. Box 1527, Corvallis, Oregon 97330.

(NOTE: These charts are available in a set of eight cards or slides. The charts compare sodium content of various foods in colorful graphs, and are an excellent teaching aid.)

4. Booklets

a. *Your Mild Sodium-Restricted Diet: For Patient Use.* American Heart Association, 1969. Available from the American Heart Association, 44 East 23 Street, New York, New York 10010.

SUGGESTED ACTIVITIES

b. *The Sodium Content of Your Food.* U.S. Department of Agriculture, Home and Garden Bulletin #233, 1980. Available from U.S. Government Printing Office, Washington, D.C.

c. *Low Salt Secrets for Your Diet.* Bull Publishing Company, 1981. Available from Bull Publishing Company, Palo Alto, California 94302.

(NOTE: This booklet includes the sodium content for over 2,600 brand names.)

5. Cookbook — *Cooking Without Your Salt Shaker.* American Heart Association, Northeast Ohio Affiliate, 1978. Available from local affiliate of American Heart Association.

B. Make transparencies.

C. Provide students with objective sheet.

D. Provide students with information and assignment sheets.

E. Discuss unit and specific objectives.

F. Discuss information and assignment sheets.

G. Develop appropriate learning activities for special needs students.

H. Review information regarding minerals and protein in "Functions and Sources of Nutrients," *Food Service Supervisor,* Section B, Unit I.

I. Review information regarding minerals and protein in "Diet Therapy," *Food Production Worker,* Section B, Unit II.

J. Review information regarding mineral and protein in "Introduction to Diet Therapy," *Food Service Supervisor,* Section B, Unit IV.

K. Measure 1 teaspoon of salt into a portion cup, and pass it around the class. Discuss the fact that 1 teaspoon of salt contains about 2 grams (2,000 milligrams) of sodium.

L. Write headings "High-Sodium Foods" and "Low-Sodium Foods" on chalkboard. Read the following list of foods, and have class respond orally as to the proper column for each food.

(NOTE: Food list — bacon, peaches, hot dog, canned soup, sugar, apple juice.)

M. Write "High-Protein Foods" and "Low-Protein Foods" on chalkboard. Have the class categorize as many foods as possible under these two headings. If time permits, divide class into "high" team and "low" team, and see which group can list the most foods.

SUGGESTED ACTIVITIES

N. Using Pennington and Church or another reference, have students compare sodium in common foods such as cornflakes, ham, diet soft drinks, bread, margarine.

O. Using Pennington and Church or another reference, have students compare protein in combination foods such as macaroni and cheese, meat loaf, beef stew.

P. Have students name some common foods that are high in sodium.

Q. Have several salt substitutes available for taste comparison.

R. Have each student make a poster comparing mineral values of two common foods such as white bread versus whole-wheat bread. Display posters, and discuss which foods are better choices.

S. With student participation, list on board food sources for calcium they would recommend to a friend who does not like milk, has difficulty digesting it, or is allergic to it.

T. Give test.

U. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Transparency masters

1. TM #1 — Mineral Elements in Adult Body
2. TM #2 — Sodium Content of Some Common Foods
3. TM #3 — Sodium Content of Some Common Beverages
4. TM #4 — Where the Sodium Is

E. Clinical assignment sheets

1. Clinical Assignment Sheet #1 — Calculate the Sodium Content of a Menu
2. Clinical Assignment Sheet #2 — Modify a General Menu to 2 Grams of Sodium
3. Clinical Assignment Sheet #3 — Plan a Menu for Controlled Protein, Sodium, and Potassium Diet

SUGGESTED ACTIVITIES

4. Clinical Assignment Sheet #4 — Make Recommendations to Increase the Iron Content of a Menu

F. Answers to clinical assignment sheets

G. Test

H. Answers to test

III. Unit references

A. American Dietetic Association. *Handbook of Clinical Dietetics.* New Haven, Connecticut: Yale University Press, 1981.

B. Livermon, Marjorie, ed. *Oklahoma Diet Manual.* Oklahoma City, Oklahoma: Oklahoma Dietetic Association, 1982.

C. Mitchell, Helen S., et al. *Nutrition in Health and Disease,* 16th ed. Philadelphia: J.P. Lippincott Company, 1976.

D. Pennington, Jean, et al. *Bowes and Church's Food Values of Portions Commonly Used,* 13th ed. Philadelphia: J.P. Lippincott Co., 1980.

E. Robinson, Corrine H. *Basic Nutrition and Diet Therapy,* 4th ed. New York: MacMillan Publishing Company, Inc., 1980.

F. Wickham, Sandy J. *Human Nutrition: A Self-Instructional Text.* Bowie, Maryland: Robert J. Brady Company, 1982.

G. Williams, Sue R. *Mowry's Basic Nutrition and Diet Therapy,* 6th ed. St. Louis: C.V. Mosby Company, 1980.

MODIFICATIONS IN MINERALS
UNIT VI

INFORMATION SHEET

I. Terms and definitions

A. Ascites — Unusual buildup of fluid in abdomen

B. Cirrhosis — Chronic disease of liver, marked by destruction of liver cells and their replacement by fatty or fibrous tissue

(NOTE: Cirrhosis can be caused by the extreme malnutrition often associated with alcoholism.)

C. Dialysis — Procedure that connects patient's blood supply to artificial kidney machine so that the machine's selective filter can cleanse the blood of waste products when kidney is unable to perform

D. Diuretic — Substance that increases output of urine

EXAMPLE: Lasix

E. Edema — Abnormal accumulation of fluid in body tissues, producing swelling

F. Electrolytes — Minerals commonly found in human blood, which exert an electrical charge when in solution; important in acid/base balance of body; aid functioning of body systems, especially the kidneys

EXAMPLES: Sodium, chlorine, potassium

G. Hepatitis — Inflammation of the liver, usually due to infection by a virus

H. Hormone — Chemical substance present in very small amounts in circulating blood; produces specific effects in some part(s) of body; most formed in glands

EXAMPLE: Insulin

I. Inorganic — Composed of matter other than plant or animal; not related to living organisms

J. Macronutrients — Essential minerals needed in amounts of 100 milligrams or more per day (Transparency #1)

(NOTE: *Macro* means *involving large quantities*.)

K. Micronutrients — Essential minerals needed in amounts of no more than a few milligrams per day (Transparency #1)

(NOTE: Micronutrients are also referred to as *trace elements*.)

INFORMATION SHEET

L. Mineral — Inorganic substance occurring naturally in the earth and having a consistent and distinctive set of physical properties

M. Organic — Composed of animal or vegetable matter; containing carbon

EXAMPLES: Vitamins, proteins, carbohydrates, fats

N. Steroid — General term for any of a large group of chemical substances that contain sterols; many are hormones that play important roles in body

EXAMPLES: Sex hormones, such as estrogen; cortisone

II. Functions of minerals in the body

(NOTE: There are at least twenty known minerals in the body, which account for 4 percent of total body weight.)

A. Constituents of bones, teeth, and cell structure

EXAMPLE: Calcium accounts for one-half of all mineral matter in the body and is the main mineral in the body's bone structure.

B. Important in maintenance of body's acid/base balance

C. Important in maintenance of body's fluid/electrolyte balance

(NOTE: Body fluids contain exact amounts of sodium, potassium, calcium, and magnesium, which control the passage of materials into and out of the cells.)

D. Constituents of regulatory compounds that control body functions

EXAMPLES: Hormones, vitamins, enzymes

E. Important in transmission of nerve impulses and contraction and relaxation of muscles

III. Minerals that require special attention in a healthy person's diet

(NOTE: If a person eats a well-balanced diet daily, he or she will usually receive minerals in adequate amounts.)

A. Calcium

(NOTE: Approximately 99 percent of calcium is found in bones.)

B. Iodine

(NOTE: With the current emphasis on reducing salt intake, care must be taken to include good food sources of iodine. In some parts of the country, iodized salt is the main source of iodine.)

INFORMATION SHEET

C. Iron

(NOTE: There are less than 5 grams of iron in the body of a healthy adult, but iron is very important to an individual's well-being and red blood cell production.)

IV. Macronutrients and micronutrients (Transparency #1)

(NOTE: There are at least twenty known minerals in the body.)

A. Essential macronutrients

(NOTE: Although the essential mineral nutrients are present in only small amounts, they are required for a large number of varied and essential purposes in body metabolism. There are other known essential macronutrients, but the following are the important ones for our discussion.)

1. Sodium
2. Potassium
3. Calcium
4. Chlorine
5. Phosphorus

B. Essential micronutrients

(NOTE: There are ten known essential trace elements, and many others that have not yet been declared essential, but the following are the important ones for our discussion.)

1. Iron
2. Iodine
3. Zinc
4. Fluoride

INFORMATION SHEET

V. Conditions that may require modification in mineral and/or protein content of diet

CONDITION	DIET MODIFICATION
Heart disease EXAMPLES: Congestive heart failure (CHF) Hypertension (persistent blood pressure higher than 140/90)	Sodium restriction (NOTE: Edema occurs with CHF because of inadequate cardiac output. The role of sodium in causing hypertension is controversial. In patient with hypertension, a low-sodium diet prevents fluid retention and, thus, reduces blood volume.)
Renal disease EXAMPLES: Renal insufficiency Renal failure	Sodium restriction Potassium restriction Protein restriction (NOTE: Diet must be individualized to the patient and may change if kidney function changes.)
Liver disease EXAMPLES: Hepatitis Cirrhosis	Sodium restriction (NOTE: Ascites may be present with cirrhosis.)
Hormone/drug therapy EXAMPLE: Steroids, such as cortisone	Sodium restriction (NOTE: Steroids promote sodium retention and, therefore, fluid retention.)
Pregnancy	Increased need for calcium, phosphorus, and iron (NOTE: In normal pregnancy, there is no need to restrict sodium.)
Total parenteral nutrition (TPN)	Precise knowledge of principles of correct vitamin, mineral, and trace element supplementation of patient on TPN is meager; needs vary with specific clinical state of individual patient

INFORMATION SHEET

VI. Characteristics of sodium and potassium

Sodium (Na)	Potassium (K)
Table salt contains 40 percent (NOTE: The chemical name for salt is *sodium chloride* [NaCl].)	Is an ingredient in most salt substitutes (NOTE: One-fourth teaspoon of average salt substitute contains 650 milligrams of potassium.)
One-half of body's total amount is located in fluids outside cells (extracellular fluids) (NOTE: A 150-pound man contains about 90 grams of sodium.)	Ninety-five percent of body's total amount is located in fluids within cells (intracellular fluids) (NOTE: A 150-pound man contains 120 grams of potassium.)
Excess is normally excreted by kidneys (NOTE: Sodium is also excreted in feces, perspiration, vomit, and diarrhea.)	Excess is normally excreted by kidneys (NOTE: Potassium is also excreted in vomit and diarrhea.)
Use of diuretics causes increased loss through kidney	Use of diuretics causes increased loss through kidney (NOTE: Once potassium deficit has occurred, dietary measures alone are generally unsuccessful in reversing preexisting potassium deficiency. Use food supplementation to spare body potassium stores.)
High level in blood causes water retention and increases blood volume (NOTE: Increased blood volume causes corresponding increase in blood pressure.)	High level in blood is toxic and causes weak heart beat, poor respiration, numbness of extremities, and confusion (NOTE: High levels occur in renal failure and severe dehydration.)
Is important in maintenance of body's water balance	Is important in maintenance of body's water balance
Is important in maintenance of body's acid/base balance	Is important in maintenance of body's acid/base balance
Regulates nerve activity	Regulates nerve activity

INFORMATION SHEET

Sodium (Na)	Potassium (K)
Aids in muscle activity, especially relaxation of muscle	Aids in muscle activity, especially relaxation of muscle (NOTE: Too much potassium in body causes weakened heart action.)
RDA is 1 gram to 3 grams per day (NOTE: This amount is equivalent to 2 1/2 grams to 8 1/2 grams table salt a day.)	RDA is 1,900 milligrams to 5,600 milligrams per day (NOTE: The average American diet supplies approximately 2 grams to 6 grams of potassium daily.)
Good sources are table salt, processed foods, dairy foods, seafood, eggs, baking powder, baking soda, antacids (NOTE: Table salt in the average American diet provides seven to ten times the daily body needs.)	Good sources are fruits and vegetables, but it is readily available in many different foods EXAMPLES: Apricots; bananas; lima beans; oranges; raw peaches; potatoes, cooked in skin; fresh tomatoes; milk; meats
Poor sources are fruits and fruit juices, fresh vegetables, most frozen vegetables, fresh meats (NOTE: The above sources are poor if prepared without added salt.)	Poor sources are fruits and vegetables cooked in large amounts of water and drained before serving; sugar; candy
Deficiency is uncommon (NOTE: Deficiency can be caused by severe vomiting, very heavy perspiration, or certain diseases of adrenal gland.)	Deficiency is caused by starvation, chronic use of diuretics, dehydration, vomiting, diarrhea, and as a consequence of uncontrolled diabetes (NOTE: Symptoms of potassium deficiency are overall muscular weakness, loss of appetite, nausea, vomiting, rapid heart beat.)

VII. Foods to use and foods to avoid for a 2-gram sodium diet (Transparencies #2-#4; Clinical Assignment Sheets #1 and #2.)

(NOTE: This diet may be prescribed for hypertension, congestive heart failure, kidney disease, liver disease, and certain hormone/drug therapies.)

A. Foods to use

1. Fresh foods, including meat, fish, poultry

2. Fruits and juices

INFORMATION SHEET

3. Regular bread *in specified amounts*
4. Regular margarine *in specified amounts*
5. Fresh and most frozen vegetables
6. Only one serving daily of desserts made with baking powder or baking soda
7. Herbs and spices

B. Foods to avoid

1. Seasonings containing sodium

   EXAMPLES: Garlic salt, monosodium glutamate

2. Processed foods

   EXAMPLES: Cheese, chips and dips, cake mixes

   (NOTE: Read labels.)

3. Most canned vegetables with added salt
4. Cured meats

   EXAMPLES: Bacon, salt pork, chipped dried beef

5. Commercial mixes
6. Self-rising flour or cornmeal
7. Quick-cooking cereal
8. Commercial canned soups
9. Pickles and olives

VIII. Foods to use and foods to avoid for a renal disease diet (Clinical Assignment Sheet #3)

(NOTE: This diet may be prescribed for patients with disturbed kidney function. The prescription is not static but changes with disease stages. Protein, sodium, potassium, and fluid intake should be regulated to kidney function.)

A. Foods to use

1. Complete proteins in amounts allowed

   (NOTE: The healthy kidney is constantly excreting nitrogen wastes from protein metabolism. In renal disease, protein is limited to avoid excessive nitrogen retention.)

INFORMATION SHEET

2. High-calorie foods

   EXAMPLES: Sugar, jelly, hard candy, jelly beans, preserves, whipped cream

3. Fresh meats in amounts allowed

   (NOTE: Amounts are regulated according to kidney function.)

4. Fruits in amounts allowed

   (NOTE: Amounts are regulated according to potassium content.)

5. Vegetables in amounts allowed

   (NOTE: Amounts are regulated according to sodium and potassium content.)

B. Foods to avoid

   1. Seasonings containing salt or sodium
   2. Potassium salt substitutes
   3. High-potassium foods

      EXAMPLES: Baked potato, raisins, prunes, bananas

   4. High-protein drinks
   5. Processed foods
   6. Commercial mixes

IX. Other mineral modifications in diet therapy

   A. High-iron diet used in treatment of nutritional anemia (Clinical Assignment Sheet #4)

      (NOTE: Nutritional anemia results from inadequate iron and/or folic acid in diet and is usually found in infants, preschool children, adolescent girls, and pregnant women.)

   B. Low-calcium diet occasionally used in treatment of kidney stones

      (NOTE: There is no clear-cut evidence indicating effectiveness of severely restricting calcium in the diet for treatment of kidney stones. Diet is inadequate and should be used only for short periods. Medications that are binding agents have been found to be of greater benefit than dietary manipulation.)

Mineral Elements in Adult Body

	Grams in Adult	Principal Locations in Body
Macronutrients		
Calcium (Ca)	1,050-1,540	99 percent in bones and teeth
Phosphorus (P)	560-840	80-90 percent in bones and teeth
Potassium (K)	245	Fluid inside cells
Chlorine (Cl)	105	Fluid outside cells
Sodium (Na)	105	Fluid outside cells
Micronutrients		
Iron (Fe)	2.8	Chiefly in hemoglobin
Iodine (I)	.01	Thyroid gland
Fluoride (F)	Minute amount	Bones and teeth
Others	Minute amount	

(NOTE: One teaspoon table salt weighs 5 grams.)

TM #1

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Sodium Content of Some Common Foods

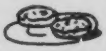
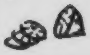
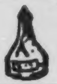
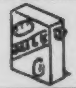
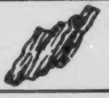
Amount of Food	Sodium (mg)
1 teaspoon salt	2,000
3 ounces cured ham	837
3 ounces turkey ham	865
1 ounce bologna	364
1 ounce cheddar cheese	210
1 ounce processed cheese food	337
½ cup canned beef stew	483
½ cup instant pudding	251
1 canned biscuit	304
1 cup cornflakes	281
1 cup canned soup, prepared according to directions	1,000

Sodium Content of Some Common Beverages

Amount of Beverages	**Sodium (mg)**
1 cup milk	120
1 cup buttermilk (average)	257
12 ounces regular cola	2
12 ounces sugar-free cola	44
6 ounces regular tomato juice	365
6 ounces orange juice	trace
1 cube beef boullion	1,000
6 ounces coffee	2

WHERE THE SODIUM IS

Content in milligrams (bold figures)

 APPLE **2**	 **APPLESAUCE** 1 cup **6**	 **APPLE PIE** 1/8, frozen **208**
 BREAD 1 slice, white **114**	 **POUND CAKE** 1 slice **171**	 **ENGLISH MUFFIN** **293**
 BUTTER 1 tablespoon, unsalted **2**	 **BUTTER** 1 tablespoon, salted **116**	 **MARGARINE** 1 tablespoon **140**
 CHICKEN ½ breast **69**	 **CHICKEN PIE** Frozen **907**	 **CHICKEN DINNER** Fast food **2,243**
 CORN **1**	 **CORN FLAKES** 1 cup **256**	 **CANNED CORN** 1 cup **384**
 CUCUMBER 7 slices **2**	 **CUCUMBER** With salad dressing **234**	 **DILL PICKLE** **928**
 GRAPES 10, seedless **1**	 **GRAPE JELLY** 1 tablespoon **3**	 **WHITE WINE** 4 ounces, domestic **19**
 **LEMON** **1**	 **SOY SAUCE** 1 tablespoon **1,029**	 **SALT** 1 teaspoon **1,938**
 MILK 1 cup **122**	 **DRY MILK** ½ cup **322**	 **COTTAGE CHEESE** 4 ounces **457**
 PORK 3 ounces **59**	 **BACON** 4 slices **548**	 **HAM** 3 ounces **1,114**
 POTATO **5**	 **POTATO CHIPS** 10 **200**	 **INSTANT MASHED** 1 cup **485**
 STEAK 3 ounces **55**	 **JUMBO BURGER** Fast food **990**	 **MEAT LOAF** Frozen dinner **1,304**
 TOMATO **14**	 **TOMATO SOUP** 1 cup **932**	 **TOMATO SAUCE** 1 cup **1,498**
 TUNA 3 ounces **50**	 **CANNED TUNA** 3 ounces **384**	 **TUNA POT PIE** Frozen **715**
 WATER 8 ounces **12**	 **CLUB SODA** 8 ounces **39**	 **ANTACID*** In water **564**

*Sodium bicarbonate

Source: U.S. Department of Agriculture

MODIFICATIONS IN MINERALS
UNIT VI

CLINICAL ASSIGNMENT SHEET #1 — CALCULATE THE SODIUM CONTENT OF A MENU

NAME ______________________________ SCORE ______________

When patients have heart disease and/or hypertension, the physician may order a 2-gram sodium diet. One of the dietary goals is to reduce salt intake to 5 grams per day. Since 2 1/2 grams salt is equal to 1 gram sodium, a 2-gram sodium diet meets this dietary goal.

PART I

Using food composition tables from Pennington and Church or another reference, calculate sodium content in one day's 2-gram sodium menu from your facility.

Menu in Your Facility	**Sodium Content (mg)**
EXAMPLE: 1 cup milk	125 mg

CLINICAL ASSIGNMENT SHEET #1

Menu in Your Facility	**Sodium Content (mg)**

Total Sodium Content ____________________ mg

____________________ gm

PART II

A. If sodium content of the diet is over 2 grams, what can you do to lower it?

____

____

B. If sodium content of the diet is under 2 grams, what can you do to raise it?

____

____

PART III

A. Taste all food as prepared. Would you be happy on this diet? ____________________

How could you improve the flavor of the food? ____________________

____

B. Add allowed seasonings. Taste food again. Would you be happy with this meal?

____

C. Are you willing to take the time to season sodium-restricted diet foods for the patients as you would want your foods seasoned if you were going to eat them?

____

CLINICAL ASSIGNMENT SHEET #1

D. List allowed seasonings that you keep in stock at your facility.

E. List allowed seasonings for specific foods.

EXAMPLES: Bay leaf, rosemary or basil for poultry

F. Do you need to stock more? If so, what are you planning to order this week?

Comments:

MODIFICATIONS IN MINERALS
UNIT VI

CLINICAL ASSIGNMENT SHEET #2 — MODIFY A GENERAL MENU TO 2 GRAMS OF SODIUM

NAME ______________________________ SCORE ______________

One of the most common diet orders is 2-gram sodium. It may be ordered as "low sodium," "low salt," "salt free," "sodium restricted," or "cardiac," but if the physician does not specify grams or milligrams of sodium, the 2-gram sodium diet should be served.

Take one day's general menu from your facility. Write it in the spaces provided. Using the same food if possible, modify the menu to 2-gram sodium. The *Oklahoma Diet Manual* provides the necessary information. Write the 2-gram sodium diet on the corresponding line with the general menu food item. Be sure to indicate whether any special food preparation technique is to be used.

General Menu in Your Facility	**Two-Gram Sodium Menu**
BREAKFAST	
EXAMPLE: 1 scrambled egg	1 salt-free (SF) scrambled egg
LUNCH	

CLINICAL ASSIGNMENT SHEET #2

SUPPER

Comments:

FSS - 321-B

MODIFICATIONS IN MINERALS
UNIT VI

CLINICAL ASSIGNMENT SHEET #3 — PLAN A MENU FOR CONTROLLED PROTEIN, SODIUM, AND POTASSIUM DIET

NAME ______________________________ SCORE ____________

Renal disease indicates that the kidneys are no longer able to function adequately. The diet may be controlled in protein, sodium, potassium, and fluid intake. Food intake should be planned individually for each patient.

PART I

Using the *Oklahoma Diet Manual* and its suggested daily food allowances for a 40-gram protein diet, plan a day's menu for this individual. The diet order is 40 grams protein, 2 grams sodium, 2,340 milligrams potassium. Your dietitian will be available to answer specific questions.

Suggested Daily Food Allowances for 40 Grams Protein and 2,340 Milligrams Potassium

Milk and milk products		1 1/2 cups
Meat and meat substitute		2 ounces
Bread and substitutes		3 servings
Vegetables:	A	1 serving
	B	2 servings
	C	None
Fruit:	A	1 serving
	B	1 serving
	C	1 serving

(NOTE: Consult *Diet Manual* for grouping of fruit and vegetables.)

Fat	As desired
Sweets	As desired
Beverages	Within fluid restriction, if applicable
Miscellaneous	None

BREAKFAST

(NOTE: Be sure to indicate if salt is to be added or omitted in food preparation.)

EXAMPLE: 1/2 cup pineapple/orange juice, fruit A

____

____

____

____

____

CLINICAL ASSIGNMENT SHEET #3

LUNCH

____

____

____

____

____

SUPPER

____

____

____

____

____

PART II

A. Why is it so important to emphasize liberal intakes of allowed fat and carbohydrate in a low-protein diet?

____

____

____

B. BUN is the abbreviation for blood urea nitrogen. Urea is a nitrogen compound in the blood that is normally excreted by the kidney. In renal disease, the BUN is elevated. Write the normal value for the BUN here. ____________________

(NOTE: BUN is a yardstick to measure the patient's progress. It is usually expressed in milligrams of urea per 100 milliliters of blood.)

Comments: __________________________________

____

____

____

MODIFICATIONS IN MINERALS
UNIT VI

CLINICAL ASSIGNMENT SHEET #4 — MAKE RECOMMENDATIONS TO INCREASE THE IRON CONTENT OF A MENU

NAME ______________________________ SCORE ______________

The RDA for iron in menstruating women is 18 milligrams per day. It is difficult to meet this allowance without careful planning. Since iron is one of the minerals that requires special attention in a healthy person's diet, you need to know and understand facts about iron.

PART I

Use this sheet and available references to compile useful information about this important mineral. Calculate the iron content of one day's menu in your facility. Choose a day when you do not serve liver.

Menu in Your Facility	**Iron Content (mg)**
EXAMPLE: 1 cup milk	.1 mg

CLINICAL ASSIGNMENT SHEET #4

Menu	**Iron Content (mg)**

Total Iron Content ______________________ mg

PART II

A. Using references, list ten good food sources of iron.

(NOTE: Milk is a very poor source of iron.)

1. ______________________
2. ______________________
3. ______________________
4. ______________________
5. ______________________
6. ______________________
7. ______________________
8. ______________________
9. ______________________
10. ______________________

B. Generally, about 10 percent of the iron in a mixed diet is absorbed. If a woman has an intake of 18 milligrams of iron in a day, what is the amount she probably absorbs?

____

(NOTE: Vitamin C enhances the absorption of iron.)

C. Menstruation (increases, decreases) the need for iron by women. Underline the correct verb.

D. In the "good old days," cooking pots were commonly made from iron. Would you expect the use of iron cooking utensils to increase iron content of foods prepared in them? (yes /no) Underline the correct answer.

CLINICAL ASSIGNMENT SHEET #4

E. Record normal values for hemoglobin

Male ______________ (grams hemoglobin per 100 milliliters of blood)

Female ______________ (grams hemoglobin per 100 milliliters of blood)

F. Record normal values for hematocrit (volume of packed cells found in 100 milliliters blood)

Male ______________

Female ______________

(NOTE: Tables of normal laboratory values may be found in many references including the *Oklahoma Diet Manual*. Different references may vary slightly in normal laboratory values. This is also true with local laboratory values.)

G. What menu adjustments would you have to make to meet the RDA of 18 milligrams?

____

____

Comments: ______________

MODIFICATIONS IN MINERALS
UNIT VI

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3

PART I — Evaluated to the satisfaction of the clinical instructor

PART II

A. Because protein is limited, adequate carbohydrate and fat are necessary to prevent catabolism of body protein. When the diet does not provide enough calories, body tissues are burned to meet the body's energy needs. These tissues are protein and leave nitrogen as a waste product.

B. Ten milligrams to 15 milligrams of urea per 100 milliliters of blood

Clinical Assignment Sheet #4

PART I — Evaluated to the satisfaction of the clinical instructor

PART II

A. Evaluated to the satisfaction of the clinical instructor

B.
$$\begin{array}{r} 18 \\ \underline{\times\ .10} \\ 1.80 \text{ mg} \end{array}$$

C. Increases

D. Yes

E. Male 14 to 18
Female 12 to 16

F. HCT 48 male
42 female

G. Evaluated to the satisfaction of the clinical instructor

MODIFICATIONS IN MINERALS
UNIT VI

TEST

NAME ______________________________ SCORE ______________

1. Match to their correct definitions terms associated with modifications in minerals. Write the correct numbers in the blanks. Definitions continue on the next page.

______ a. Inflammation of the liver, usually due to infection by a virus

______ b. Abnormal accumulation of fluid in body tissues, producing swelling

______ c. General term for any of a large group of chemical substances that contain sterols; many are hormones that play important roles in body

______ d. Inorganic substance occurring naturally in the earth and having a consistent and distinctive set of physical properties

______ e. Substance that increases output of urine

______ f. Essential minerals needed in amounts of no more than a few milligrams per day

______ g. Unusual buildup of fluid in abdomen

______ h. Chemical substance present in very small amounts in circulating blood; produces specific effects in some part(s) of body; most formed in glands

______ i. Composed of matter other than plant or animal; not related to living organisms

______ j. Procedure that connects patient's blood supply to artificial kidney machine so that the machine's selective filter can cleanse the blood of waste products when kidney is unable to perform

______ k. Minerals commonly found in human blood, which exert an electrical charge when in solution; important in acid/base balance of body; aid functioning of body systems, especially the kidneys

1. Mineral
2. Inorganic
3. Organic
4. Macronutrients
5. Micronutrients
6. Electrolytes
7. Hepatitis
8. Cirrhosis
9. Ascites
10. Dialysis
11. Diuretic
12. Edema
13. Hormone
14. Steroid

TEST

______l. Chronic disease of liver, marked by destruction of liver cells and their replacement by fatty or fibrous tissue

______m. Essential minerals needed in amounts of 100 milligrams or more per day

______n. Composed of animal or vegetable matter; containing carbon

2. Select from the following list functions of minerals in the body. Write an "X" in the blank before each correct statement.

______a. Important in maintenance of body's fluid/electrolyte balance

______b. Important energy sources for the body

______c. Constituents of regulatory compounds that control body functions

______d. Nonessential to life

______e. Important in transmission of nerve impulses and contraction and relaxation of muscles

______f. Important in the elimination of waste from body

______g. Important in maintenance of body's acid/base balance

______h. Constituents of eyes and ears

3. Name minerals that require special attention in a healthy person's diet.

a. ____

b. ____

c. ____

4. Distinguish between macronutrients and micronutrients. Write "Macro" in the blanks before macronutrients, and "Micro" in the blanks before micronutrients.

__________a. Iron

__________b. Calcium

__________c. Phosphorus

__________d. Zinc

TEST

__________e. Potassium

__________f. Sodium

__________g. Chlorine

__________h. Fluoride

__________i. Iodine

5. Identify conditions that may require modification in mineral and/or protein content of diet. Write the name of the condition in the correct blank. Some diet modifications may be appropriate for more than one condition.

Heart disease
Liver disease
Pregnancy
Renal disease
Hormone/drug therapy
Total parenteral nutrition (TPN)

CONDITION	DIET MODIFICATION
a. __________	Increased need for calcium, phosphorus, and iron
b. __________ c. __________ d. __________	Sodium restriction
e. __________	Precise knowledge of principles of correct vitamin, mineral, and trace element supplementation of patient on TPN is meager; needs vary with specific clinical state of individual patient
f. __________	Sodium restriction Potassium restriction Protein restriction

TEST

6. Distinguish between sodium and potassium characteristics. Write an "X" in the column below *sodium* if the characteristic is correct for sodium. Write an "X" in the column below *potassium* if the characteristic is correct for potassium. Some characteristics may be correct for both minerals.

Sodium	**Potassium**		
________	________	a.	Is important in maintenance of body's water balance
________	________	b.	Ninety-five percent of body's total amount is located in fluids within cells (intracellular fluids)
________	________	c.	Aids in muscle activity, especially relaxation of muscle
________	________	d.	Poor sources are fruits and vegetables cooked in large amounts of water and drained before serving; sugar; candy
________	________	e.	Deficiency is uncommon
________	________	f.	RDA is 1 gram to 3 grams per day
________	________	g.	Excess is normally excreted by kidneys
________	________	h.	Table salt contains 40 percent
________	________	i.	Is important in maintenance of body's acid/base balance
________	________	j.	High level in blood causes water retention and increases blood volume
________	________	k.	Is an ingredient in most salt substitutes
________	________	l.	RDA is 1,900 milligrams to 5,600 milligrams per day
________	________	m.	Good sources are table salt, processed foods, dairy foods, seafood, eggs, baking powder, baking soda, antacids
________	________	n.	Deficiency is caused by starvation, chronic use of diuretics, dehydration, vomiting, diarrhea, and as a consequence of uncontrolled diabetes
________	________	o.	Use of diuretics causes increased loss through kidney

TEST

Sodium	**Potassium**		
________	________	p.	Regulates nerve activity
________	________	q.	One-half of body's total amount is located in fluids outside cells (extracellular fluids)
________	________	r.	High level in blood is toxic and causes weak heart beat, poor respiration, numbness of extremities, and confusion
________	________	s.	Poor sources are fruits and fruit juices, fresh vegetables, most frozen vegetables, fresh meats
________	________	t.	Good sources are fruits and vegetables, but it is readily available in many different foods

7. Distinguish among foods to use and foods to avoid for a 2-gram sodium diet. Write a "U" in the blanks before foods to use. Write an "A" in the blanks before foods to avoid.

_____a. Commercial mixes

_____b. Regular margarine *in specified amounts*

_____c. Herbs and spices

_____d. Pickles and olives

_____e. Commercial canned soups

_____f. Fresh foods, including meat, fish, poultry

_____g. Cured meats

_____h. Quick-cooking cereal

_____i. Processed foods

_____j. Only one serving daily of desserts made with baking powder or baking soda

_____k. Regular bread *in specified amounts*

_____l. Self-rising flour or cornmeal

_____m. Fresh and most frozen vegetables

_____n. Most canned vegetables with added salt

_____o. Seasonings containing sodium

_____p. Fruits and juices

TEST

8. Distinguish among foods to use and foods to avoid for a renal disease diet. Write a "U" in the blanks before foods to use. Write an "A" in the blanks before foods to avoid.

______a. High-protein drinks

______b. Seasonings containing salt or sodium

______c. High-calorie foods

______d. High-potassium foods

______e. Fresh meats in amounts allowed

______f. Complete proteins in amounts allowed

______g. Processed foods

______h. Potassium salt substitutes

______i. Vegetables in amounts allowed

______j. Commercial mixes

______k. Fruits in amounts allowed

9. Name other mineral modifications in diet therapy.

a. ____

b. ____

(NOTE: Test questions 10-13 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

10. Calculate the sodium content of a menu.

11. Modify a general menu to 2 grams of sodium.

12. Plan a menu for controlled protein, sodium, and potassium diet.

13. Make recommendations to increase the iron content of a menu.

MODIFICATIONS IN MINERALS
UNIT VI

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 483. The point total for questions 1-9 is 208; the point total for questions 10-13 is 275.)

1. (27 points)

   a. 7
   b. 12
   c. 14
   d. 1
   e. 11
   f. 5
   g. 9
   h. 13
   i. 2
   j. 10
   k. 6
   l. 8
   m. 4
   n. 3

2. (16 points)

   a, c, e, g

3. (3 points)

   a. Calcium
   b. Iodine
   c. Iron

4. (27 points)

   a. Micro
   b. Macro
   c. Macro
   d. Micro
   e. Macro
   f. Macro
   g. Macro
   h. Micro
   i. Micro

ANSWERS TO TEST

5. (12 points)

   a. Pregnancy

   b. Heart disease

   c. Liver disease

   d. Hormone/drug therapy

   e. Total parenteral nutrition (TPN)

   f. Renal disease

6. (40 points)

Sodium	**Potassium**		
X	X	a.	Is important in maintenance of body's water balance
	X	b.	Ninety-five percent of the body's total amount is located in fluids within cells (intracellular fluids)
X	X	c.	Aids in muscle activity, especially relaxation of muscle
	X	d.	Poor sources are fruits and vegetables cooked in large amounts of water and drained before serving; sugar, candy
X		e.	Deficiency is uncommon
X		f.	RDA is 1 gram to 3 grams per day
X	X	g.	Excess is normally excreted by kidneys
X		h.	Table salt contains 40 percent
X	X	i.	Is important in maintenance of body's acid/base balance
X		j.	High level in blood causes water retention and increases blood volume
	X	k.	Is an ingredient in most salt substitutes

ANSWERS TO TEST

Sodium	Potassium		
	X	l.	RDA is 1,900 milligrams to 5,600 milligrams per day
X		m.	Good sources are table salt, processed foods, dairy foods, seafood, eggs, baking powder, baking soda, antacids
	X	n.	Deficiency is caused by starvation, chronic use of diuretics, dehydration, vomiting, diarrhea, and as a consequence of uncontrolled diabetes
X	X	o.	Use of diuretics causes increased loss through kidney
X	X	p.	Regulates nerve activity
X		q.	One-half of body's total amount is located in fluids outside cells (extracellular fluids)
	X	r.	High level in blood is toxic and causes weak heart beat, poor respiration, numbness of extremities, and confusion
X		s.	Poor sources are fruits and fruit juices, fresh vegetables, most frozen vegetables, fresh meats
	X	t.	Good sources are fruits and vegetables, but it is readily available in many different foods

7. (48 points)

a.	A	i.	A
b.	U	j.	U
c.	U	k.	U
d.	A	l.	A
e.	A	m.	U
f.	U	n.	A
g.	A	o.	A
h.	A	p.	U

ANSWERS TO TEST

8. (33 points)

a.	A	g.	A
b.	A	h.	A
c.	U	i.	U
d.	A	j.	A
e.	U	k.	U
f.	U		

9. (2 points)

   a. High-iron diet used in treatment of nutritional anemia

   b. Low-calcium diet occasionally used in treatment of kidney stones

10. Evaluated to the satisfaction of the clinical instructor (50 points)

11. Evaluated to the satisfaction of the clinical instructor (75 points)

12. Evaluated to the satisfaction of the clinical instructor (100 points)

13. Evaluated to the satisfaction of the clinical instructor (50 points)

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

UNIT OBJECTIVE

After completing this unit, the student should be able to individualize a weight control and diabetic diet to patients' preferences to enhance compliance to meal plan. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with modifications in calories and carbohydrates to their correct definitions.
2. Name conditions that require modifications in calories.
3. Select from a list symptoms of diabetes mellitus.
4. Select from a list high risk groups for diabetes.
5. Name phases of treatment for diabetes.
6. Select from a list goals of diet therapy for treatment of diabetes.
7. Match types of diabetic diets to their correct descriptions.
8. Describe gradual educational process of individuals with diabetes.
9. Select from a list complications of diabetes.
10. Distinguish between diabetic coma and insulin reaction.
11. Name types of insulin.
12. Distinguish between weight control diet and diabetic diet.
13. Describe the food exchange system.
14. Name types of treatment for obesity.
15. Name complications of obesity.
16. Name conditions that require modifications in carbohydrates.
17. Select from a list various forms of sugar found in food products.

OBJECTIVE SHEET

18. Determine daily caloric needs.
19. Interpret information about carbohydrates found on labels.
20. Plan meals using exchanges.
21. Individualize a diabetic diet for a specific patient.
22. Calculate food substitutions for sick days for individuals with insulin-dependent diabetes.

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

SUGGESTED ACTIVITIES

I. Suggested activities

A. Order materials planned to supplement unit.

1. Filmstrips with audio cassette tapes

(NOTE: These filmstrips are available only to Oklahoma teachers on a free-loan basis. These teachers may order from the State Coordinator of the Dietetic Assistant Program, Tulsa County AVTS, 3420 South Memorial, Tulsa, Oklahoma 74145. Out-of-state teachers must order from the address listed with the filmstrip.)

a. *Diabetic Meal Planning* — Available from National Health Films, Box 13973, Station K, Atlanta, Georgia 30324.

(NOTE: The ease and flexibility of using exchange lists in diabetic meal planning is explained. Using a sample diet prescription, meals that are varied and attractive as well as nutritious are illustrated.)

b. *Diabetic Diet Counseling* — Available from National Health Films, Box 13973, Station K, Atlanta, Georgia 30324.

(NOTE: Practical suggestions are made regarding the selection of food items and the preparation of daily meals. Eating in a restaurant is discussed as are food replacement during a short-term illness, and the importance of the availability of a quickly metabolized form of carbohydrate.)

2. Pamphlets

a. *Using Nutrition Labels with Food Exchange Lists* — Available from U.S. Department of Health, Education, and Welfare, Public Health Service, Food and Drug Administration, 5600 Fishers Lane, Rockville, Maryland 20852. HEW Publications No. (FDA) 77-2072.

(NOTE: This pamphlet explains how people on weight control diets can use the information on food labels to add variety to their diet.)

b. *What You Should Know About Hypoglycemia* — Available from Chronic Disease Division, Oklahoma State Department of Health, Box 53551, Oklahoma City, Oklahoma 73152.

(NOTE: This pamphlet defines hypoglycemia and its control, and provides suggested meal patterns.)

SUGGESTED ACTIVITIES

c. *Stucky Points for Weight Control* — Available from Nutrition Education Center, 6600 West 95th, Suite 209, Overland Park, Kansas 66212.

(NOTE: This pocket-sized pamphlet contains kilocalorie points in 850 foods. Formerly known as *Calorie Point Diet,* the diet was developed by Virginia Stucky.)

d. *Special Foods for Your Special Diet — Calorie Controlled* — Available from Consumer Affairs Department, Tom Thumb Supermarkets, 14303 Inwood Road, Dallas, Texas 75234.

(NOTE: This pamphlet lists products that are specifically labeled dietetic, lower in calories, or sugar free.)

3. Additional resources available from the following organizations

a. American Dietetic Association
430 North Michigan Avenue
Chicago, Illinois 60611

b. American Diabetes Association, Inc.
2 Park Avenue
New York, New York 10016

c. National Diabetes Information Clearinghouse
Box NDIC
Bethesda, Maryland 20205

d. Ames Company
Division of Miles Laboratories, Inc.
Elkhart, Indiana 46514

e. Eli Lilly and Company
740 South Alabama Street
Indianapolis, Indiana

f. E.R. Squibb and Sons
P.O. Box 4000
Princeton, New Jersey 08540

g. Juvenile Diabetes Foundation
Executive Office, 23 East 26th Street
New York, New York 10010

h. Pfizer Laboratories
235 East 42nd Street
New York, New York 10017

SUGGESTED ACTIVITIES

i. Upjohn Company
7000 Portage Road
Kalamazoo, Michigan 49001

4. Books and booklets

   a. *Family Cookbook* — Available from American Diabetes Association, Inc., 600 5th Avenue, New York, New York 10020, and/or the American Dietetic Association, 430 North Michigan Avenue, Chicago, Illinois 60611.

   (NOTE: Published by Prentice-Hall, Inc. in 1980, this cookbook was prepared by the American Dietetic Association and the American Diabetes Association. It includes over 250 recipes with nutrient composition and exchange values for family use. It also offers suggestions for exercise, eating out, sick days, fast foods, brown bag lunches, canning and freezing foods, and overweight persons with diabetes. It is an excellent reference.)

   b. *What You Need to Know About Diabetes* — Available from American Diabetes Association, Inc., 600 5th Avenue, New York, New York 10020.

   (NOTE: This booklet contains twenty-eight pages of basic information on diabetes in an easy-to-read question and answer format, including detailed explanations of the disease, its early symptoms, and its control and treatment.)

   c. *Everything About Exchange Values for Foods* — Cinnamon, P. and M. Swanson. 61 pages, 1981. Available from Idaho Research Foundation, Inc., P.O. Box 3368, University Station, Moscow, Idaho 83843.

   (NOTE: This book includes exchange values for convenience foods, prepared items, and alcoholic beverages; it also gives directions for calculating exchanges of mixed dishes. It is designed primarily for people with diabetes and professionals who already have a good grasp of the exchange lists.)

5. Films

   (NOTE: Churchill Films will not rent films, but they will provide a list of libraries where the films can be rented. Phone [213] 657-5110.)

   a. *Diets for All Reasons*. Color, 20 minutes. Available from Churchill Films, 662 North Robertson Boulevard, Los Angeles, California 90069.

   (NOTE: Eating differently? Are you getting adequate nutrition? The different diets evaluated include traditional, single food, weight reduction, and vegetarian. This film stresses variety and the need for certain nutrients.)

SUGGESTED ACTIVITIES

b. *For Tomorrow We Shall Diet.* Color, 24 minutes. Available from Churchill Films, 662 North Robertson Boulevard, Los Angeles, California 90069.

(NOTE: A young woman who sets out to lose twenty pounds discovers the need to change eating habits, the dangers of fad diets, and the relationship of calories to energy output, proper nutrition, and exercise.)

c. *Look Before You Eat.* Color, 22 minutes. Available from Churchill Films, 662 North Robertson Boulevard, Los Angeles, California 90069.

(NOTE: A practical look at our eating habits and their relationship to our health. Some students try to reduce the amount of sugar, fat, and salt in their diets, and then report on the results. The roles of the food industry, fast foods, and vending machines are examined.)

B. Make transparencies.

C. Provide students with objective sheet.

D. Discuss unit and specific objectives.

E. Provide students with information and assignment sheets.

F. Discuss information and assignment sheets.

G. Develop appropriate learning activities for special needs students.

H. Have students write manufacturers of sugar substitutes to ask for free literature and recipes for calorie-controlled diets. Share with class.

I. Have several sugar substitutes available for comparison of taste and carbohydrate content.

J. Have person with insulin-dependent diabetes talk to class about psychological adjustment to having a chronic disease.

K. Rinse peaches packed in heavy syrup, then have class compare taste with peaches packed in unsweetened fruit juice or water. Discuss patient education in this area.

L. With food models, have groups of students plan one meal and place it on serving plate. Discuss, as a group, the serving sizes required on calorie-controlled diet.

SUGGESTED ACTIVITIES

M. Divide class into pairs. Have each student practice giving diet instructions. Write down positive as well as negative comments about techniques. Offer constructive criticism.

N. Have students bring a label from a favorite cereal and determine how much they could eat as one bread exchange.

O. As a class, calculate exchange value of one recipe by determining the total exchange value of each ingredient and then dividing by the total number of servings the recipe yields.

P. Call out names of foods and have class respond with correct exchange list. Include difficult ones like soup, peanut butter, and salad dressing.

Q. Share with class copies of *Forecast Magazine, Diabetes in News,* and the *Family Cookbook.*

R. Discuss various fad diets and the dangers of not consuming adequate calories and/or carbohydrates.

S. Explain transparencies as follows:

   1. Transparency #1 — Normal blood sugar is the result of a balance between exercise and food intake.

   2. Transparency #2 — Hyperglycemia is a result of too much food eaten and/or too little exercise, or too little insulin.

   3. Transparency #3 — Hypoglycemia is a result of low food intake and/or too much insulin, or too much exercise with no corresponding increase in food intake.

T. Give test.

U. Reteach if necessary.

II. Instructional materials

   A. Objective sheet

   B. Suggested activities

   C. Information sheet

   D. Transparency masters

      1. TM #1 — Normal Blood Sugar

      2. TM #2 — Hyperglycemia

      3. TM #3 — Hypoglycemia

      4. TM #4 — Food Exchanges in Meal Plan System

      5. TM #5 — Meal Plan

SUGGESTED ACTIVITIES

E. Class assignment sheets

  1. Class Assignment Sheet #1 — Choose Correct Statements Concerning Obesity and Diabetes
  2. Class Assignment Sheet #2 — Determine Daily Caloric Needs
  3. Class Assignment Sheet #3 — Interpret Information About Carbohydrates Found on Labels
  4. Class Assignment Sheet #4 — Plan Meals Using Exchanges

F. Answers to class assignment sheets

G. Clinical assignment sheets

  1. Clinical Assignment Sheet #1 — Individualize a Diabetic Diet for a Specific Patient
  2. Clinical Assignment Sheet #2 — Calculate Food Substitutions for Sick Days for Individuals with Insulin-Dependent Diabetes

H. Answers to clinical assignment sheets

I. Test

J. Answers to test

III. Unit references

A. American Dietetic Association. *Handbook of Clinical Dietetics.* New Haven, Connecticut: Yale University Press, 1981.

B. Barlow, D.J., E. Edge, and J.A. Wulff. *Teaching Guide for People Who Have Diabetes.* Oklahoma City: University of Oklahoma Medical Center, 1968.

C. *A Guide for Professionals: The Effective Application of Exchange Lists for Meal Planning.* Chicago: American Diabetes Association and American Dietetic Association, 1977.

D. Livermon, Marjorie. *Oklahoma Diet Manual.* Oklahoma City, Oklahoma: Oklahoma Dietetic Association, 1982.

E. Lovette, B.J. *Diabetes . . . Self Care Acts for Good Control.* Asheville, North Carolina: Proctor Enterprises, 1980.

F. "Obesity — A Comprehensive Approach." Report of the Second Ross Roundtable on Medical Issues, Columbus, Ohio: Ross Laboratories, 1980.

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

INFORMATION SHEET

I. Terms and definitions

A. Blood sugar — Glucose, the main fuel for the body, circulating in the blood (Transparencies #1-#3)

(NOTE: One hundred percent of carbohydrate is changed to blood glucose; over 50 percent of protein and 10 percent of fat are also changed to blood glucose.)

B. Diabetes mellitus — Metabolic disease that affects body's use of carbohydrates, fat, and protein because of disturbance in production, or utilization of insulin

(NOTE: This condition can be due to a decrease or lack of insulin produced by the pancreas, as well as ineffective insulin or insulin resistance factors present in cells.)

C. Diabetic coma — Unconscious condition that can result in death; caused by ketoacidosis

D. Food exchanges — Measured servings of food that are approximately equal in calories, carbohydrates, fat, and protein

(NOTE: Food exchanges are usually weighed or measured.)

E. Glucose tolerance — Body's ability to use glucose; can be measured by laboratory test

F. Hyperglycemia — Higher-than-normal level of glucose in blood

G. Hypoglycemia — Lower-than-normal level of glucose in blood

H. Insulin — Hormone, made in pancreas, that helps body cells use blood sugar for energy or store it for later use

(NOTE: Insulin is a protein and cannot be taken by mouth because digestion would change its chemical makeup.)

I. Insulin-dependent diabetes mellitus (Type I) — Condition in which pancreas is unable to produce adequate amount of insulin for body; injections of insulin are required daily

(NOTE: This term replaces *juvenile-onset diabetes.*)

INFORMATION SHEET

J. Insulin reaction — Condition resulting from low blood sugar in an individual with insulin-dependent diabetes

(NOTE: An insulin reaction occurs rapidly.)

K. Ketoacidosis — Serious complication that can result from uncontrolled diabetes; acid condition of the body resulting from overproduction of ketones

(NOTE: Individuals who do not have enough insulin and cannot use their glucose burn body fat for energy, resulting in excess production of ketones in the body.)

L. Ketones — Substances formed when body burns fat for energy

M. Meal plan — System for prescribing correct amounts and kinds of foods to be eaten at specified times; provides variety in meals

N. Non-insulin-dependent diabetes mellitus (Type II) — Condition in which pancreas is still able to produce insulin, but not in sufficient supply for body needs; high blood sugar can usually be controlled by diet or diet and oral hypoglycemic agents

(NOTE: This term replaces *maturity or adult-onset diabetes.*)

O. Obesity — Condition in which weight is greater than 20 percent above ideal weight

P. Oral hypoglycemic agents — Drugs used to reduce blood glucose levels by stimulating pancreas to produce more insulin and/or enhancing action of insulin

EXAMPLES: Orinase, Tolinase, Dymelor, Diabenese

Q. Overweight — Weight 10 to 20 percent above ideal weight with too high a proportion of fat to lean body tissue

(NOTE: Athletes can weigh 10 to 20 percent above ideal weight but have very little fat.)

R. Pancreas — Gland that lies just behind the stomach; secretes insulin and many important digestive enzymes

INFORMATION SHEET

II. Conditions that require modifications in calories

(NOTE: These conditions require long-term guidance and counseling that will lead to new food choices and preferences.)

A. Diabetes

(NOTE: Diet prescribed may be liberal diabetic, calorie controlled, or calculated diet.)

B. Overweight

(NOTE: Weight control may be necessary because of obesity, hypertension, heart disease, respiratory difficulties, or bone and joint diseases.)

C. Malnutrition

(NOTE: A high-calorie, high-protein diet may be used in treatment of cancer, trauma, burns, or loss of appetite.)

III. Symptoms of diabetes mellitus

(NOTE: Elevated blood sugar is not easily detected by the way an individual feels; as a result, diabetes may not be diagnosed in early stages.)

A. Excessive thirst

(NOTE: High blood sugar pulls water from cells.)

B. Frequent urination

(NOTE: A high blood sugar level causes excessive thirst. Increased fluid consumption results in spilling some sugar through the urine.)

C. Weakness

(NOTE: Weakness occurs when body cells are unable to convert sugar to energy.)

D. Blurred vision

(NOTE: High levels of blood sugar over an extended period of time can cause ruptured blood vessels in eyes.)

E. Loss of weight

(NOTE: This condition occurs because the body is unable to use sugar it takes in.)

INFORMATION SHEET

F. Increased appetite and hunger

G. Skin infection

IV. High risk groups for diabetes (Class Assignment Sheet #1)

(NOTE: The cause of diabetes is not known.)

A. Persons from families with a history of diabetes

(NOTE: The tendency to have diabetes is inherited.)

B. Persons over forty

(NOTE: The incidence of diabetes is five times as great after the age of forty.)

C. Overweight persons

(NOTE: More than 80 percent of individuals with diabetes are overweight when diagnosed.)

D. Women

(NOTE: Mothers of babies weighing 10 pounds or more at birth are more likely to develop diabetes.)

V. Phases of treatment for diabetes

(NOTE: Diabetes is a chronic illness; there is no cure, but it may be controlled by a combination of three phases of treatment so that the patient can have a normal life.)

A. Meal plan

(NOTE: Some patients' diabetes can be controlled by diet alone.)

B. Medication

EXAMPLES: Insulin or oral hypoglycemic agents

(NOTE: Insulin has been available since 1921 and is extracted from the pancreases of cattle and hogs.)

C. Exercise

(NOTE: It is important to balance energy intake and energy output.)

INFORMATION SHEET

VI. Goals of diet therapy for treatment of diabetes

- A. Attain and maintain desirable body weight
- B. Provide a normal growth rate in children and pregnant women
- C. Minimize glucose in urine and keep blood sugar as near normal as possible
- D. Prevent and/or delay development of complications associated with diabetes
- E. Modify diet as necessary for complications of diabetes and for associated diseases

  EXAMPLE: Individuals with diabetes have an increased risk of heart disease and may benefit from a fat-controlled diet.

- F. Improve overall health of patient by attaining and maintaining an optimal nutritional status
- G. Provide each patient with individualized education and follow-up program

VII. Types of diabetic diets

- A. Liberal or free diabetic diet
  - 1. Includes mild restrictions on amount and types of foods
  - 2. Is suitable for diabetic patients (usually past middle age) who have been free from symptoms

    (NOTE: This diet is particularly effective for the geriatric resident of normal weight in a nursing home because the times of meals and meal patterns are approximately the same every day.)

- B. Calorie control
  - 1. May be suitable for non-insulin-dependent diabetics
  - 2. Controls calories only and varies with patient's ideal weight, height, sex, age, and physical activity

    (NOTE: The physician should specify calories desired and type of hypoglycemic agent.)

- C. Calculated diet
  - 1. Is necessary for brittle or difficult-to-control diabetes

    (NOTE: This is Type I diabetes.)

INFORMATION SHEET

2. Involves calculation of calories, protein, carbohydrates, fats, and division of carbohydrates

   (NOTE: Physician may specify total calories, grams of carbohydrates, proteins, fats, and fractional division of carbohydrates among feedings, or physician may order an ADA distribution of nutrients.)

   EXAMPLE: 1,200 Calorie ADA

D. Diet for pregnancy complicated by diabetes mellitus

   1. Increases calories by 300 over prepregnancy diet

      (NOTE: No weight reduction is allowed during pregnancy.)

   2. Emphasizes high biologic value sources of protein

      EXAMPLES: Eggs, milk, meat

VIII. Gradual educational process of individuals with diabetes (Class Assignment Sheets #2-#4; Clinical Assignment Sheets #1 and #2)

(NOTE: This process also involves significant family members and/or friends.)

A. Interview patient

   1. Consider height and weight

   2. Obtain food preferences and habits

   3. Obtain diet history

   4. Determine individual's understanding of diabetes

      (NOTE: This should include the importance of diet in controlling diabetes.)

B. Calculate diet

   1. Select correct meal plan according to physician's order

      (NOTE: Consider caloric needs; division of protein, carbohydrate, and fat; and division into meals and snacks.)

   2. Individualize diet to patient

      (NOTE: Consider the need for insulin, family food budget, and other special medical conditions such as heart disease.)

INFORMATION SHEET

C. Instruct for home care

(NOTE: Provide verbal instruction, meal plan, and supplemental reference material, such as the *Family Cookbook* from American Dietetic Association. This cannot be done effectively in one meeting.)

1. Instruct patient on meal plan
2. Instruct on use of exchange lists
3. Train patient to plan food for meals using individualized pattern
4. Discuss helpful hints
5. Describe food preparation techniques
6. Instruct insulin-dependent individual to carry a source of carbohydrate at all times in event of a hypoglycemic episode
7. Instruct insulin-dependent individual on alterations in the diet to be made for sick days

D. Follow up

1. Plan follow-up visit after dismissal
2. Provide your phone number for additional questions

IX. Complications of diabetes

(NOTE: Diabetes is the third leading cause of death in the United States.)

A. Premature arteriosclerosis

B. Heart disease

C. Stroke

D. Ketoacidosis

E. Kidney disease

F. Blindness

(NOTE: Diabetes is the number one cause of blindness in the United States.)

G. Disease of nerve endings

INFORMATION SHEET

X. Diabetic coma and insulin reaction

  A. Diabetic coma

    1. Causes

      a. Deficiency of insulin

      (NOTE: This can occur in individuals who have diabetes and have not been diagnosed.)

      b. Not taking insulin

      c. Overeating

      d. Physical stress

      EXAMPLE: Surgery

      e. Emotional stress

      f. Infection or illness

      g. High blood sugar

    2. Symptoms

      a. Fruity odor of breath (ketonic breath)

      b. Dry skin and mouth

      c. Thirst

      d. Very deep and rapid breathing

      e. Excessive urination

      f. Weak, tired

      (NOTE: The patient will not have all of these symptoms, and the severity of the symptoms may vary.)

    3. Action — Call doctor immediately

  B. Insulin reaction

    1. Causes

      a. Low blood sugar

      b. Too much insulin

INFORMATION SHEET

   c. Too little food

   d. Increased exercise with no increase in food intake, or decreased insulin

2. Symptoms

   a. Shakiness

   b. Nervousness

   c. Cold, clammy skin

   d. Sweating

   e. Headache

   f. Hunger

   g. Staggering walk

   h. Slurred speech

   (NOTE: Individual may appear to be intoxicated.)

3. Action — Immediately drink a glass of sweetened orange juice or any other readily absorbed carbohydrate as directed by physician

   (NOTE: Some physicians prefer skim milk.)

XI. Types of insulin

(NOTE: The differences are primarily in the onset of action, peak of action, and duration of action.)

A. Short acting

   (NOTE: This type works within thirty minutes to one hour, peaks in two to four hours, and lasts five to seven hours.)

   EXAMPLE: Regular, semilente

B. Intermediate

   (NOTE: This type works within one to two hours, peaks at eight to twelve hours, and lasts twenty-four hours.)

   EXAMPLE: NPH, lente

C. Long acting

   (NOTE: This type works within four to six hours, peaks at eighteen to twenty-six hours, and lasts about thirty-six hours.)

   EXAMPLE: Ultralente

INFORMATION SHEET

XII. Weight control diet and diabetic diet

	WEIGHT CONTROL DIET	DIABETIC DIET
Modification Defined	Provides various levels of calorie control to achieve and/or maintain a desired body weight	Provides various levels of calorie control to achieve and/or maintain a desired body weight Attempts to keep urine and blood sugar levels as near normal as possible
Treatment and Rationale	Meal plan is based on food exchange system Maintenance of body weight is dependent upon establishment of an equilibrium between energy input (calories consumed) and energy output (exercise and/or activity) (NOTE: To lose weight, energy output must exceed energy input by decreasing calories consumed, increasing activity, or both.)	Meal plan is based on food exchange system (NOTE: Diet is the most important factor in diabetic control.) Meals and snacks should be well integrated with activity and exercise (NOTE: Exercise increases insulin availability and insulin sensitivity.) Carbohydrates are controlled to equal forty to fifty-five percent of total calories Amount of saturated fat is reduced to delay and minimize complications associated with arteriosclerotic disease Inclusion of high-fiber foods may improve glucose tolerance Maintenance of body weight is dependent upon establishment of an equilibrium between energy input (calories consumed) and energy output (exercise and/or activity)
Special Considerations	In addition to diet, patient should receive counseling in regard to eating behavior, exercise, goals, and commitment	In addition to diet, patient should receive counseling in regard to eating behavior, exercise, goals, and commitment If insulin or oral hypoglycemic agents are used in treatment, distribution and timing of food intake are required Different classifications require specific individualized meal planning EXAMPLES: Insulin dependent, non-insulin-dependent, diabetes in children and young adults, pregnant diabetics
Adequacy of Diet	Diets below 1,000 calories generally do not meet RDA	Meets RDA

INFORMATION SHEET

XIII. Food exchange system (Transparencies #4 and #5; Class Assignment Sheet #4; Clinical Assignment Sheets #1 and #2)

(NOTE: This system is useful in treatment of diabetes, obesity, hypoglycemia, and Type IV hyperlipoproteinemia.)

A. Food divided into six groups or exchange lists

1. Milk exchange

(NOTE: This exchange is based on skim milk. If whole milk is used, fat exchanges must be counted.)

2. Vegetable exchange

(NOTE: Some raw vegetables may be used as desired.)

3. Fruit exchange

(NOTE: This exchange is based on fresh fruit or fruit that is processed without added sugar.)

4. Bread exchange

(NOTE: This exchange includes a variety of foods such as breads, starchy vegetables, cereal, flour, dried beans, prepared foods, soup.)

5. Meat exchange

(NOTE: This group is divided into lean meat, medium-fat meat, high-fat meat.)

6. Fat exchange

(NOTE: In addition to fats and oils, bacon, nuts, and salad dressings are on this list.)

B. Exchange list composition

(NOTE: Each food within the same list contains approximately the same amount of calories, carbohydrates, proteins, and fats as all other foods on the list. The description of each exchange list also indicates specific foods that are good sources of individual nutrients.)

1. Equal calories
2. Equal carbohydrates
3. Equal proteins
4. Equal fats

INFORMATION SHEET

XIV. Types of treatment for obesity

A. Well-balanced, calorie-controlled diet

(NOTE: Weight lost slowly is more easily kept off.)

B. Exercise

C. Behavior modification

(NOTE: This change in lifestyle involves identifying bad habits and reestablishing better ones.)

D. Fasting

(NOTE: Fasting should only be done under physician's supervision.)

E. Semistarvation, modified fast

(NOTE: Modified fast should be carried out only under physician's supervision and by individuals who are at least forty pounds overweight because it can cause heart irregularities.)

F. Surgery

EXAMPLE: Intestinal bypass or stomach "stapling"

G. Combinations of the above

EXAMPLE: An individual may follow a well-balanced, calorie-controlled diet along with an exercise program.

XV. Complications of obesity

(NOTE: Many diseases are associated with obesity.)

A. Higher death rate

EXAMPLE: Persons 25 percent overweight are 1³/₄ times more likely to die in a given year than are persons the same age who are normal weight. For persons 40 percent overweight, the rate increases to 2¹/₄ times the normal rate.

B. Diabetes

(NOTE: Over 80 percent of adults who have diabetes are obese.)

INFORMATION SHEET

- C. Blindness, related to diabetes
- D. Heart attack
- E. Stroke
- F. Hypertension
- G. Fatty heart
- H. Fatty liver
- I. Fatty kidneys
- J. Gallstones and/or gallbladder disease
- K. Degenerative arthritis of hip and knee
- L. Hemorrhoids
- M. Varicose veins
- N. Hyperlipidemia
- O. Hernia
- P. Enhanced surgical risk
- Q. Psychosocial disturbances

XVI. Conditions that require modifications in carbohydrates

- A. Hypoglycemia

  (NOTE: Hypoglycemia is not a disease but a group of symptoms that can be controlled by omitting simple sugars and eating six small feedings daily. These feedings are high in protein with regulated intake of carbohydrates.)

- B. Dumping syndrome

  (NOTE: To prevent rapid emptying of stomach after partial resection, give small, frequent, dry meals that are low in carbohydrates.)

XVII. Various forms of sugar found in food products

- A. Honey
- B. Sucrose

  EXAMPLE: Table sugar

INFORMATION SHEET

C. Corn syrup

D. Glucose

(NOTE: Glucose is also referred to as dextrose.)

E. Fructose

(NOTE: Fructose is also referred to as levulose or fruit sugar.)

F. Invert sugar

(NOTE: This is a mixture of glucose and fructose found in fruits.)

G. Lactose

H. Dextrin

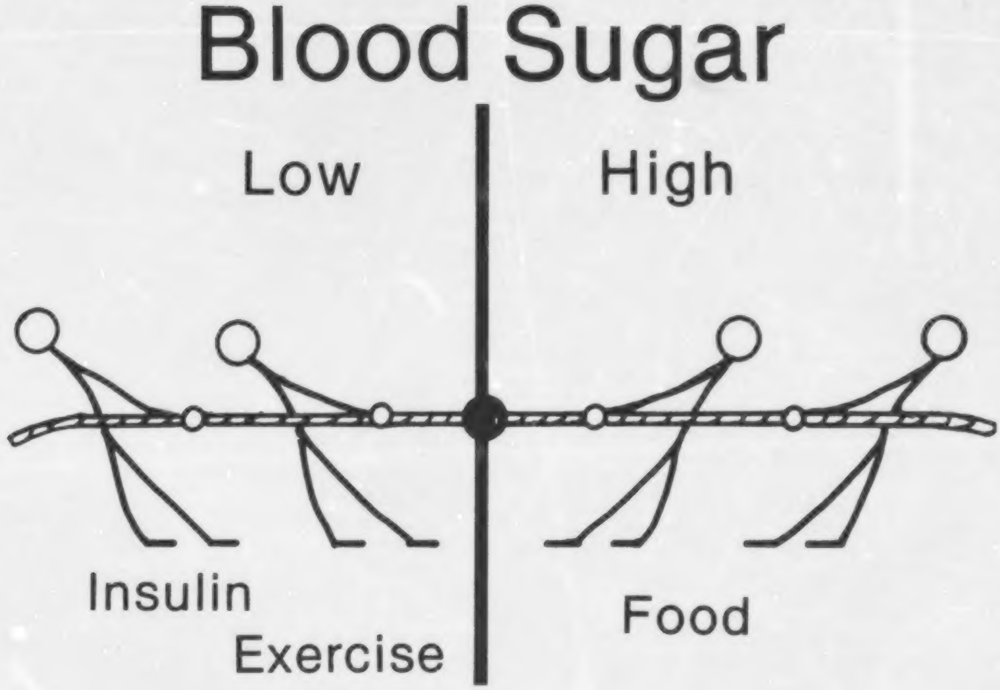
I. Mannitol

J. Sorbitol

K. Glycerin

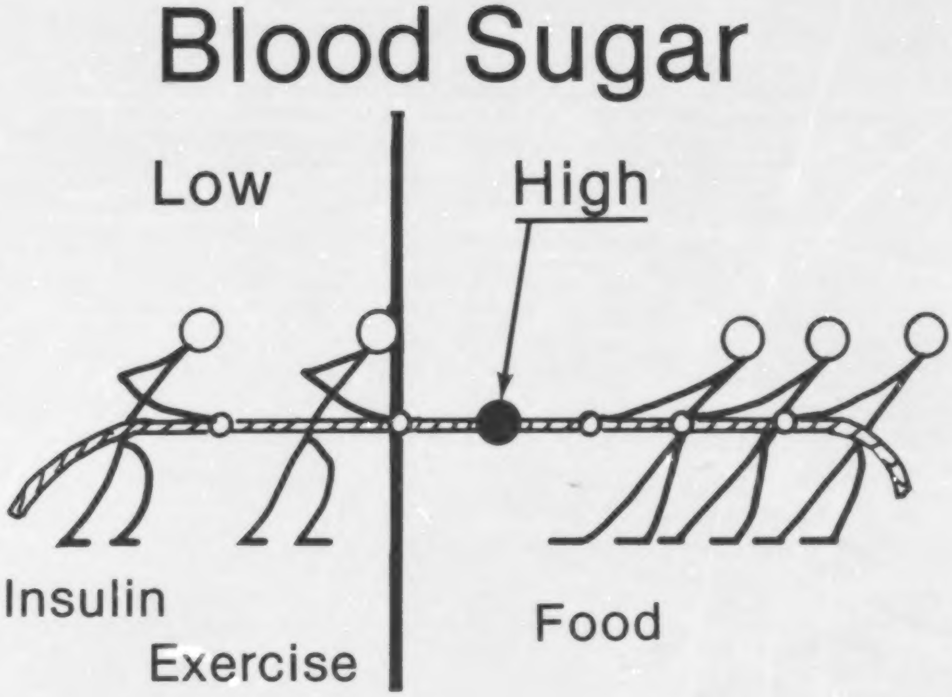
L. Malt

Normal Blood Sugar


Blood Sugar
Low
High
Insulin
Exercise
Food

Used with permission of the University of Oklahoma Health Sciences Center.

Hyperglycemia


Blood Sugar
Low
High
Insulin
Exercise
Food

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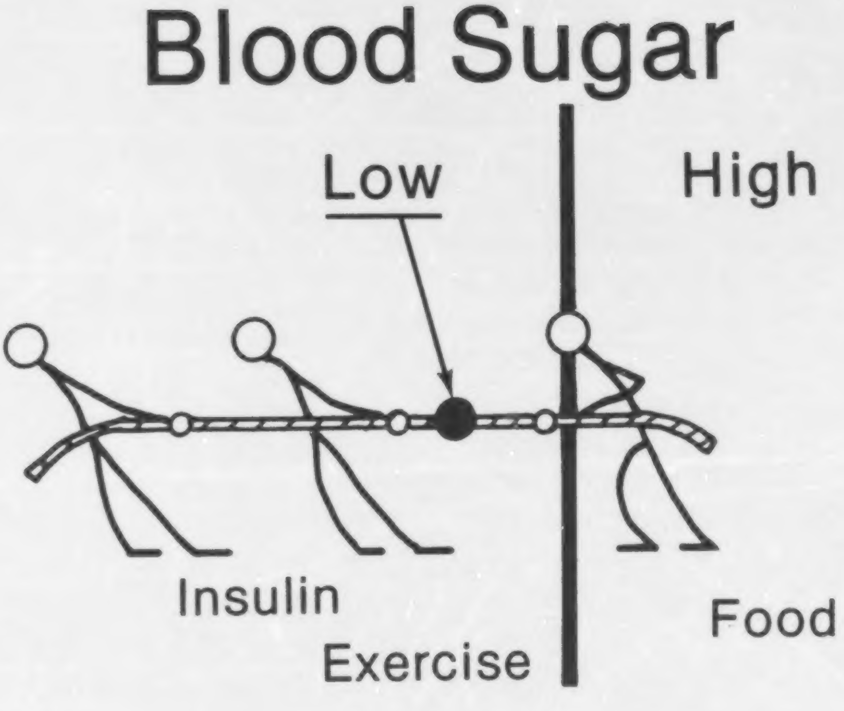
FSS - 365-B

Hypoglycemia


Blood Sugar
Low
High
Insulin
Exercise
Food

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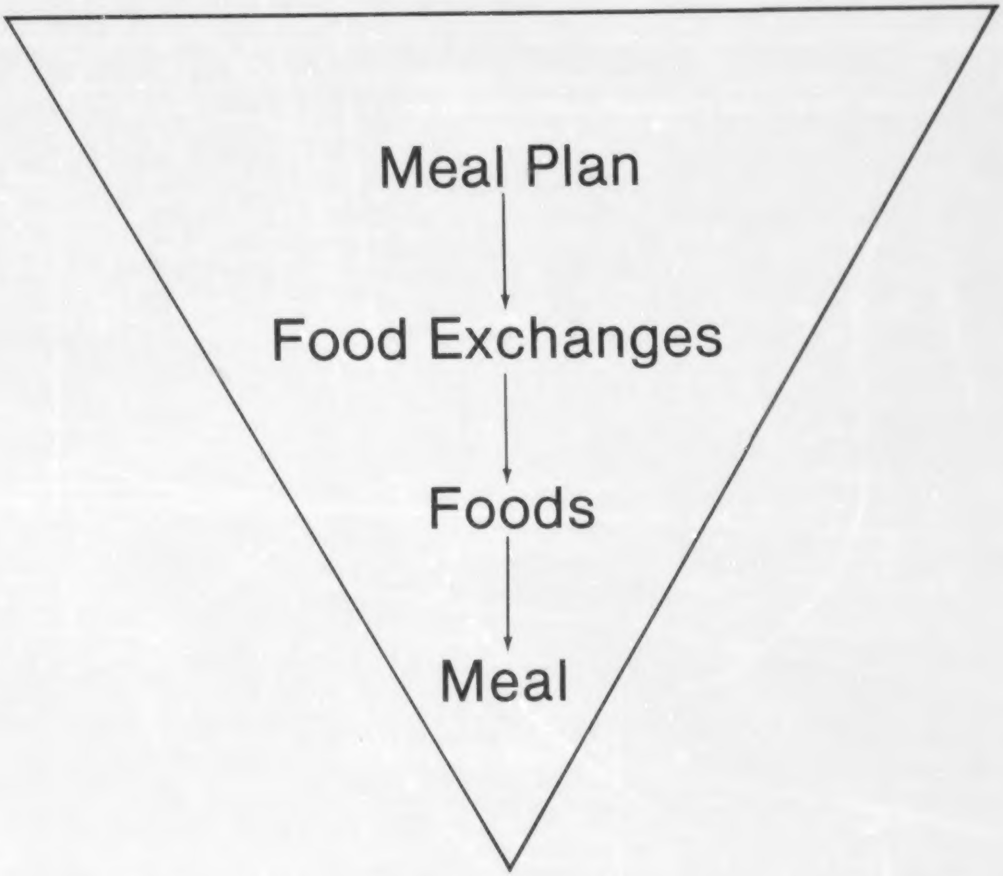
TM #3

FSS - 367-B

Food Exchanges In Meal Plan System



Meal Plan

↓

Food Exchanges

↓

Foods

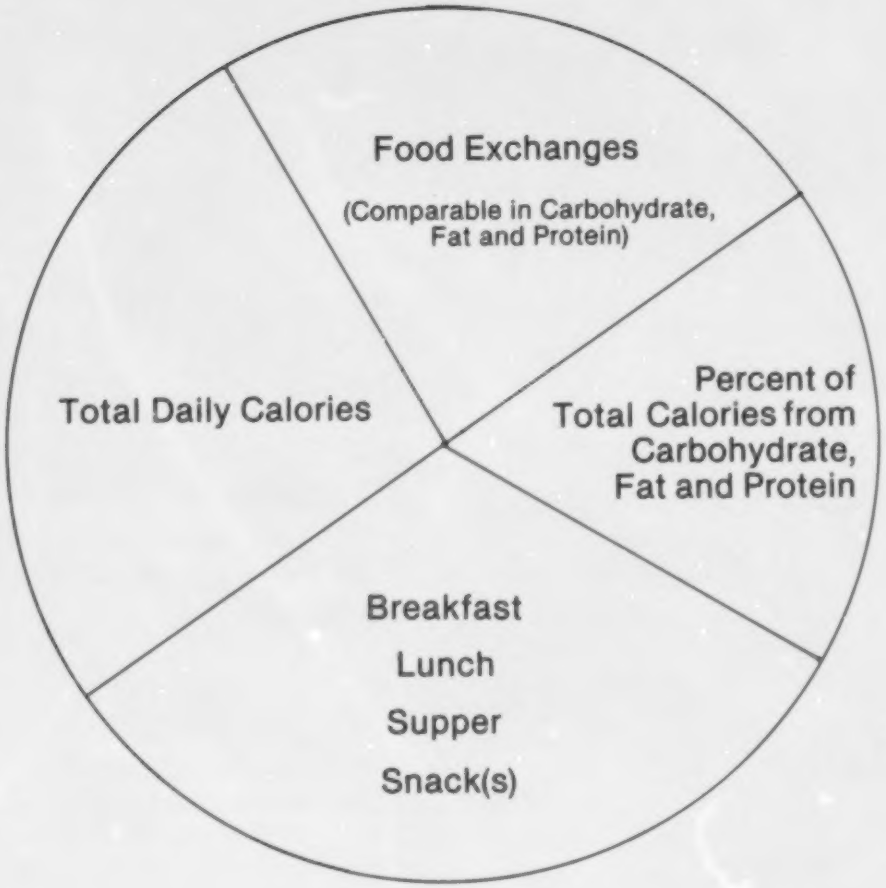
↓

Meal

TM #4

FSS - 369-B

Meal Plan


Food Exchanges
(Comparable in Carbohydrate, Fat and Protein)
Total Daily Calories
Percent of Total Calories from Carbohydrate, Fat and Protein
Breakfast
Lunch
Supper
Snack(s)

TM #5

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

CLASS ASSIGNMENT SHEET #1 — CHOOSE CORRECT STATEMENTS CONCERNING OBESITY AND DIABETES

NAME ______________________ SCORE __________

Obesity affects one out of four adult Americans and can result in serious complications and premature death. It causes great concern in our country with an estimated $10 billion spent on weight control, fitness, and health aids each year. Test your knowledge by answering the following true or false statements. Circle "T" for true and "F" for false.

T F 1. It takes approximately 3,500 excess calories for most people to develop one extra pound of fat.

T F 2. Obesity caused by hormonal abnormalities produces an abundance of fat tissue spread generally over the entire body.

T F 3. A fat child has more fat cells than a thin child.

T F 4. An overweight person at fifty years of age has approximately twice the chance of dying within a year as a thin person.

T F 5. Undernourished persons have higher blood pressure than obese persons.

T F 6. Hardening of the arteries can be seen in obese children as young as five or six years of age.

T F 7. Heart patients may suffer pains in the chest after eating a heavy meal.

T F 8. Heart attacks are the leading cause of death in the United States.

T F 9. Obese middle-aged women are particularly prone to developing gallstones.

T F 10. More than 20 percent of persons with diabetes do not know that they have the disease.

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

CLASS ASSIGNMENT SHEET #2 — DETERMINE DAILY CALORIC NEEDS

NAME ________________________________ SCORE ______________

Individual dietary needs are based on many factors such as weight, height, body build, and sex. You must also consider whether the person needs to gain or lose weight. A simple way to determine caloric needs is to use the formula below. Calculate your own caloric needs.

PART I — DESIRABLE WEIGHT

The first step is to determine your desirable weight. The following formula can be used. Write your answers in the blanks provided.

Weight and Height

Build	Women	Men
Medium	Allow 100 pounds for first 5 feet of height, plus 5 pounds for each additional inch	Allow 106 pounds for first 5 feet of height, plus 6 pounds for each additional inch
Small	Subtract 10 percent	Subtract 10 percent
Large	Add 10 percent	Add 10 percent

A. Your height is ____________________

B. Your build is ____________________

C. Your desirable body weight should be ____________________

CLASS ASSIGNMENT SHEET #2

PART II — APPROXIMATE CALORIC NEEDS

The second step of determining daily needs is to take your desirable weight as calculated in Part I and use it in the following formula. Write your answers in the blanks provided.

A. Basal calories equal desirable body weight times ten ____________

B. Add activity calories

1. Sedentary equals desirable body weight times three
2. Moderate equals desirable body weight times five
3. Strenuous equals desirable body weight times ten ____________

C. Add calories for weight gain

(NOTE: Adding 500 calories per day will cause 1 pound weight gain per week. 1 pound = 3,500 calories.) ____________

D. Subtract calories for weight loss

(NOTE: Subtracting 500 calories per day will cause 1 pound weight loss per week.) ____________

Caloric needs ____________

(NOTE: Compare this with calculation in Unit III.)

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

CLASS ASSIGNMENT SHEET #3 — INTERPRET INFORMATION ABOUT CARBOHYDRATES FOUND ON LABELS

NAME ____ SCORE ________________

One dietary guideline is to avoid too much sugar in the diet. Persons who are on calorie-controlled diets or carbohydrate-controlled diets need to recognize names of simple sugars on labels. Here are lists of ingredients from four food products. Circle the names of sugars or similar sweetening agents.

EXAMPLE: Flour, [✓ sugar,] salt, baking powder, [✓ fructose,] [✓ corn syrup]

A.	**Cake mix:**	List of ingredients — Sugar and dextrose, enriched flour, vegetable shortening, propylene glycol monoesters, leavening, nonfat dry milk, modified food starch, salt, cellulose gum, Yellow No. 5, artificial coloring and flavoring
B.	**Breakfast tart:**	List of ingredients — Enriched wheat flour, partially hydrogenated vegetable oil, dextrose, sugar, red raspberry preserves (corn syrup, red raspberries, and sugar), corn syrup, whey, crackermeal, pregelatinized wheat starch, water, salt, baking powder, citric acid, baking soda, gelatin, artificial coloring, reduced iron, niacinamide, vitamin A palmitate, pyridoxine hydrochloride, riboflavin, thiamin hydrochloride, and folic acid; BHA for freshness
C.	**Dry cereal:**	List of ingredients — Degermed yellow corn meal, sugar, graham flour, brown sugar, wheat starch, coconut oil, brown sugar syrup, salt, honey, nonfat dry milk, sodium bicarbonate, dextrose, trisodium phosphate, sodium ascorbate (vitamin C), artificial flavor, calcium carbonate, niacin, iron, vitamin A palmitate, pyridoxine hydrochloride, thiamin mononitrate, riboflavin, vitamin B_{12}, and vitamin D_2
D.	**Granola bar:**	List of ingredients — Rolled oats, brown sugar, semisweet chocolate chips, corn syrup, rolled whole wheat, partially hydrogenated vegetable oil, rice, sugar, salt, malt, invert sugar, corn syrup solids, glycerin, nonfat milk solids, dried coconut, almonds, sorbitol, honey, salt, natural and artificial flavors, BHA, citric acid

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

CLASS ASSIGNMENT SHEET #4 — PLAN MEALS USING EXCHANGES

NAME ______________________________ SCORE ______________

As a dietetic assistant, you are expected to know how to take the physician's diet order of 1,500 calories and translate that into food to be eaten by the patient.

PART I — 1,500-calorie diet

Using the *Oklahoma Diet Manual* as a reference and the form below, record the exchanges specified for a 1,500-calorie diet with a bedtime feeding.

Meal Plan For ______________________________________

Carbohydrate ________ grams Protein ________ grams Fat ________ grams Calories________ grams

	1 Milk	2 Vegetable	3 Fruit	4 Bread	5 Meat	6 Fat
Breakfast Time ________						
Snack Time ________						
Lunch or Dinner Time ________						
Snack Time ________						
Dinner or Supper Time ________						
Bedtime Snack Time ________						

CLASS ASSIGNMENT SHEET #4

PART II

Using the meal plan you developed in Part I, plan the food you will serve the patient on the 1,500-calorie diet.

MEAL OR SNACK	MEAL PATTERN Include number of exchanges	MENU Specify correct amounts to be served
BREAKFAST	EXAMPLES: 1 nonfat milk	1 cup nonfat milk
	Milk	
	Fruit	
	Bread	
	Meat	
	Fat	
MID A.M. SNACK		
LUNCH	Milk	
	Vegetable	
	Fruit	
	Bread	
	Meat	
	Fat	
MID P.M. SNACK		
SUPPER	Milk	
	Vegetable	
	Fruit	
	Bread	
	Meat	
	Fat	
HS SNACK (Bedtime)		

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CLASS ASSIGNMENT SHEET #4

PART III

Using the form below, change the 1,500-calorie meal plan to 1,600 calories.

MEAL OR SNACK	MEAL PATTERN Include number of exchanges	MENU Specify correct amounts to be served
BREAKFAST	EXAMPLES: 1 nonfat milk	1 cup nonfat milk
	Milk	
	Fruit	
	Bread	
	Meat	
	Fat	
MID A.M. SNACK		
LUNCH	Milk	
	Vegetable	
	Fruit	
	Bread	
	Meat	
	Fat	
MID P.M. SNACK		
SUPPER	Milk	
	Vegetable	
	Fruit	
	Bread	
	Meat	
	Fat	
HS SNACK (Bedtime)		

380-B

CLASS ASSIGNMENT SHEET #4

PART IV

Using the form below, change the 1,500-calorie meal plan to 1,400 calories.

MEAL OR SNACK	MEAL PATTERN Include number of exchanges	MENU Specify correct amounts to be served
BREAKFAST	EXAMPLES: 1 nonfat milk	1 cup nonfat milk
	Milk	
	Fruit	
	Bread	
	Meat	
	Fat	
MID A.M. SNACK		
LUNCH	Milk	
	Vegetable	
	Fruit	
	Bread	
	Meat	
	Fat	
MID P.M. SNACK		
SUPPER	Milk	
	Vegetable	
	Fruit	
	Bread	
	Meat	
	Fat	
HS SNACK (Bedtime)		

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

1. T
2. F
3. T
4. T
5. F
6. T
7. T
8. T
9. T
10. T

Class Assignment Sheet #2 — Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #3

A. Sugar, dextrose

B. Dextrose, sugar, red raspberry preserves (corn syrup, sugar), corn syrup

C. Sugar, brown sugar, brown sugar syrup, honey, dextrose

D. Brown sugar, semisweet chocolate chips, corn syrup, sugar, malt, invert sugar, corn syrup solids, glycerin, sorbitol, honey

Class Assignment Sheet #4 — Evaluated to the satisfaction of the class instructor

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

CLINICAL ASSIGNMENT SHEET #1 — INDIVIDUALIZE A DIABETIC DIET FOR A SPECIFIC PATIENT

NAME ____ SCORE ________________

All individuals with diabetes do not have the same food habits, nor do they like the same foods day after day. Individual food tolerances vary. To enhance compliance with a meal plan, it is necessary to cater to the person's preferences as much as the physician's diet order will allow. Using the diet manual as a guide (refer to guidelines for individualizing the diabetic diet), individualize a diabetic diet for a patient who does not drink milk and for a patient who will drink only whole milk. Write your answers in the blanks provided.

(NOTE: Your clinical instructor may assign more diets, if desired.)

CLINICAL ASSIGNMENT SHEET #1

STANDARD MEAL PLAN FOR 1,200 CALORIES	INDIVIDUALIZED MEAL PLAN FOR PATIENT WHO DOES NOT DRINK MILK	INDIVIDUALIZED MEAL PLAN FOR PATIENT WHO WILL DRINK ONLY WHOLE MILK
BREAKFAST 1 fruit		
1 medium-fat meat		
1 bread		
1 fat		
½ nonfat milk		
LUNCH 2 medium-fat meat		
2 vegetable		
1 bread		
1 fruit		
2 fat		
½ nonfat milk		
SUPPER 2 medium-fat meat		
2 vegetable		
1 bread		
1 fruit		
1 fat		
½ nonfat milk		
BEDTIME 1 bread		
½ nonfat milk		

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MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

CLINICAL ASSIGNMENT SHEET #2 — CALCULATE FOOD SUBSTITUTIONS FOR SICK DAYS FOR INDIVIDUALS WITH INSULIN-DEPENDENT DIABETES

NAME ______________________________ SCORE ______________

When an individual with insulin-dependent diabetes is unable to take his usual solid food, the carbohydrate content of the daily meal plan should be replaced by soft or liquid foods that contain approximately the same amount of carbohydrates. Using the diet manual as reference (refer to food substitutions during illness for diabetic patients), figure the carbohydrate content of a diet as assigned by your clinical instructor. Your instructor will demonstrate the proper procedure.

CARBOHYDRATE FOODS			SUBSTITUTION DURING ILLNESS	
Type of food	Amount	Grams of CHO	Food	Amount

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

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MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

TEST

NAME ______________________________ SCORE ______________

1. Match terms associated with modifications in calories and carbohydrates to their correct definitions. Write the correct numbers in the blanks. Terms and definitions are continued on the following page.

_____a. Measured servings of food that are approximately equal in calories, carbohydrates, fat, and protein

_____b. Metabolic disease that affects body's use of carbohydrates, fat, and protein because of disturbance in production or utilization of insulin

_____c. Unconscious condition that can result in death; caused by ketoacidosis

_____d. Glucose, the main fuel for the body, circulating in the blood

_____e. Body's ability to use glucose; can be measured by laboratory test

_____f. Higher-than-normal level of glucose in blood

_____g. Serious complication that can result from uncontrolled diabetes; acid condition of the body resulting from overproduction of ketones

_____h. Hormone, made in pancreas, that helps body cells use blood sugar for energy or store it for later use

_____i. Condition in which pancreas is unable to produce adequate amount of insulin for body; injections of insulin are required daily

_____j. Condition resulting from low blood sugar in an individual with insulin-dependent diabetes

_____k. Lower-than-normal level of glucose in blood

_____l. Substances formed when body burns fat for energy

1. Insulin-dependent diabetes mellitus (Type I)
2. Diabetic coma
3. Ketoacidosis
4. Blood sugar
5. Glucose tolerance
6. Insulin
7. Insulin reaction
8. Food exchanges
9. Diabetes mellitus
10. Hypoglycemia
11. Hyperglycemia
12. Ketones

TEST

______m. System for prescribing correct amounts and kinds of foods to be eaten at specified times; provides variety in meals

______n. Gland that lies just behind the stomach; secretes insulin and many important digestive enzymes

______o. Condition in which weight is greater than 20 percent above ideal weight

______p. Drugs used to reduce blood glucose levels by stimulating pancreas to produce more insulin and/or enhancing action of insulin

______q. Weight 10 to 20 percent above ideal weight with too high a proportion of fat to lean body tissue

______r. Condition in which pancreas is still able to produce insulin, but not in sufficient supply for body needs; high blood sugar can usually be controlled by diet or diet and oral hypoglycemic agents

13. Meal plan
14. Obesity
15. Pancreas
16. Overweight
17. Oral hypoglycemic agents
18. Non-insulin-dependent diabetes mellitus (Type II)

2. Name conditions that require modifications in calories.

a. ____

b. ____

c. ____

3. Select from the following list symptoms of diabetes mellitus. Write an "X" in the blank before each correct answer.

______a. Blurred vision

______b. Lack of appetite

______c. Frequent urination

______d. Weakness

______e. Hyperactivity

______f. Excessive thirst

______g. Night blindness

______h. Loss of weight

______i. Increased appetite and hunger

______j. Skin infection

TEST

4. Select from the following list high risk groups for diabetes. Write an "X" in the blank before each correct answer.

______a. Persons with high intake of sugar

______b. Women

______c. Persons over forty

______d. Underweight persons

______e. Overweight persons

______f. Persons from families with history of diabetes

5. Name phases of treatment for diabetes.

a. ____

b. ____

c. ____

6. Select from the following list goals of diet therapy for treatment of diabetes. Write an "X" in the blank before each correct answer.

______a. Modify diet as necessary for complications of diabetes and for associated diseases

______b. Provide a program to avoid exercise

______c. Attain and maintain desirable body weight

______d. Provide a reduction diet for pregnant women

______e. Minimize glucose in urine and keep blood sugar as near normal as possible

______f. Prevent and/or delay development of complications associated with diabetes

______g. Provide each patient with individualized education and follow-up program

______h. Provide copies of popular diets

TEST

______i. Improve overall health of patient by attaining and maintaining an optimal nutritional status

______j. Provide a meal plan which totally changes the patient's eating habits

______k. Provide a normal growth rate in children and pregnant women

7. Match types of diabetic diets to their correct descriptions. Write the correct numbers in the blanks. Answers may be used more than once.

______a. Includes mild restrictions on amount and types of foods

______b. Is necessary for brittle or difficult-to-control diabetes

______c. May be suitable for non-insulin-dependent diabetics

______d. Controls calories only and varies with patient's ideal weight, height, sex, age, and physical activity

______e. Is suitable for diabetic patients (usually past middle age) who have been free from symptoms

______f. Involves calculation of calories, protein, carbohydrates, fats, and division of carbohydrates

______g. Increases calories by 300 over prepregnancy diet

______h. Emphasizes high biologic value sources of protein

1. Liberal or free diabetic diet
2. Calorie control
3. Calculated diet
4. Diet for pregnancy complicated by diabetes mellitus

8. Describe gradual educational process of individuals with diabetes.

a. Interview patient — ______________________________

____

____

____

____

TEST

b. Calculate diet — ____________________

____

____

c. Instruct for home care — ____________________

____

____

____

____

____

____

____

____

____

d. Follow up — ____________________

____

____

9. Select from the following list complications of diabetes. Write an "X" in the blank before each correct answer.

______a. Malnutrition

______b. Ketoacidosis

______c. Heart disease

______d. Stroke

______e. Anemia

______f. Disease of nerve endings

______g. Cirrhosis of the liver

______h. Kidney disease

______i. Blindness

______j. Cancer

______k. Premature arteriosclerosis

TEST

10. Distinguish between diabetic coma and insulin reaction. Write "diabetic coma" or "insulin reaction" in the correct blanks.

a. ______________________

Causes

Not taking insulin

Overeating

Physical stress

Emotional stress

Infection or illness

Deficiency of insulin

High blood sugar

b. ______________________

Causes

Too much insulin

Increased exercise with no increase in food intake, or decreased insulin

Low blood sugar

Too little food

c. ______________________

Action

Immediately drink a glass of sweetened orange juice or any other readily absorbed carbohydrate as directed by physician

d. ______________________

Action

Call doctor immediately

e. ______________________

Symptoms

Shakiness

Nervousness

Cold, clammy skin

Sweating

Headache

Staggering walk

Slurred speech

Hunger

f. ______________________

Symptoms

Fruity odor of breath (ketonic breath)

Very deep and rapid breathing

Weak, tired

Excessive urination

Dry skin and dry mouth

Thirst

11. Name types of insulin.

a. ______________________

b. ______________________

c. ______________________

TEST

12. Distinguish between weight control diet and diabetic diet. Write "weight control" in the blanks above the characteristics of the weight control diet, and "diabetic" in the blanks above the characteristics of the diabetic diet.

a. ______________________

Special considerations

In addition to diet, patient should receive counseling in regard to eating behavior, exercise, goals, and commitment

Different classifications require specific individualized meal planning

If insulin or oral hypoglycemic agents are used in treatment, distribution and timing of food intake are required

b. ______________________

Special considerations

In addition to diet, patient should receive counseling in regard to eating behavior, exercise, goals, and commitment

c. ______________________

Modification Defined

Attempts to keep urine and blood sugar levels as near normal as possible

Provides various levels of calorie control to achieve and/or maintain a desired body weight

d. ______________________

Modification Defined

Provides various levels of calorie control to achieve and/or maintain a desired body weight

e. ______________________

Treatment and Rationale

Meal plan is based on food exchange system

Maintenance of body weight is dependent upon establishment of an equilibrium between energy input (calories consumed) and energy output (exercise and/or activity)

f. ______________________

Treatment and Rationale

Maintenance of body weight is dependent upon establishment of an equilibrium between energy input (calories consumed) and energy output (exercise and/or activity)

Carbohydrates are controlled to equal forty to fifty-five percent of total calories

Meal plan is based on food exchange system

Inclusion of high-fiber foods may improve glucose tolerance

Meals and snacks should be well integrated with activity and exercise

Amount of saturated fat is reduced to delay and minimize complications associated with arteriosclerotic disease

g. ______________________

Adequacy of Diet

Diets below 1,000 calories generally do not meet RDA

h. ______________________

Adequacy of Diet

Meets RDA

TEST

13. Describe the food exchange system.

    a. Food divided into six groups or exchange lists

        1) ______________________________
        2) ______________________________
        3) ______________________________
        4) ______________________________
        5) ______________________________
        6) ______________________________

    b. Exchange list composition

        1) ______________________________
        2) ______________________________
        3) ______________________________
        4) ______________________________

14. Name four types of treatment for obesity.

    a. ______________________________
    b. ______________________________
    c. ______________________________
    d. ______________________________

15. Name five complications of obesity.

    a. ______________________________
    b. ______________________________
    c. ______________________________
    d. ______________________________
    e. ______________________________

16. Name conditions that require modifications in carbohydrates.

    a. ______________________________
    b. ______________________________

TEST

17. Select from the following list various forms of sugar found in food products. Write an "X" in the blanks before each correct answer.

______a. Lactose

______b. Saccharin

______c. Sucrose

______d. Corn syrup

______e. Sorbitol

______f. Cyclamate

______g. Mannitol

______h. Invert sugar

______i. Gluten

______j. Honey

______k. Dextrin

______l. Fructose

______m. Glucose

______n. Aspartame

______o. Malt

______p. Glycerin

(NOTE: Test questions 18-22 list assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

18. Determine daily caloric needs.

19. Interpret information about carbohydrates found on labels.

20. Plan meals using exchanges.

21. Individualize a diabetic diet for a specific patient.

22. Calculate food substitutions for sick days for individuals with insulin-dependent diabetes.

MODIFICATIONS IN CALORIES AND CARBOHYDRATES
UNIT VII

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 674. The point total for questions 1-17 is 272; the point total for questions 18-22 is 402.)

1. (36 points)

   a. 8
   b. 9
   c. 2
   d. 4
   e. 5
   f. 11
   g. 3
   h. 6
   i. 1
   j. 7
   k. 10
   l. 12
   m. 13
   n. 15
   o. 14
   p. 17
   q. 16
   r. 18

2. (3 points)

   a. Diabetes
   b. Overweight
   c. Malnutrition

3. (20 points)

   a, c, d, f, h, i, j

4. (12 points)

   b, c, e, f

5. (3 points)

   a. Meal plan
   b. Medication
   c. Exercise

ANSWERS TO TEST

6. (22 points)

   a, c, e, f, g, i, k

7. (16 points)

a.	1	e.	1
b.	3	f.	3
c.	2	g.	4
d.	2	h.	4

8. (30 points)

   Descriptions should include the following

   a. Interview patient

      1) Consider height and weight
      2) Obtain food preferences and habits
      3) Obtain diet history
      4) Determine individual's understanding of diabetes

   b. Calculate diet

      1) Select correct meal plan according to physician's order
      2) Individualize diet to patient

   c. Instruct for home care

      1) Instruct patient on meal plan
      2) Instruct on use of exchange lists
      3) Train patient to plan food for meals using individualized pattern
      4) Discuss helpful hints
      5) Describe food preparation techniques

ANSWERS TO TEST

6) Instruct insulin-dependent individual to carry a source of carbohydrate at all times in event of a hypoglycemic episode

7) Instruct insulin-dependent individual on alterations in the diet to be made for sick days

d. Follow up

1) Plan follow-up visit after dismissal

2) Provide your phone number for additional questions

9. (22 points)

b, c, d, f, h, i, k

10. (18 points)

a.	Diabetic coma	d.	Diabetic coma
b.	Insulin reaction	e.	Insulin reaction
c.	Insulin reaction	f.	Diabetic coma

11. (3 points)

a. Short acting

b. Intermediate

c. Long acting

12. (24 points)

a.	Diabetic	e.	Weight control
b.	Weight control	f.	Diabetic
c.	Diabetic	g.	Weight control
d.	Weight control	h.	Diabetic

ANSWERS TO TEST

13. (20 points)

Description should include the following

a. Food divided into six groups or exchange lists

1) Milk exchange
2) Vegetable exchange
3) Fruit exchange
4) Bread exchange
5) Meat exchange
6) Fat exchange

b. Exchange list composition

1) Equal calories
2) Equal carbohydrates
3) Equal proteins
4) Equal fats

14. (4 points)

Answer should include any four of the following

a. Well-balanced, calorie-controlled diet
b. Exercise
c. Behavior modification
d. Fasting
e. Semistarvation, modified fast
f. Surgery
g. Combinations of the above

ANSWERS TO TEST

15. (5 points)

Answer should include any five of the following

a. Higher death rate

b. Diabetes

c. Blindness, related to diabetes

d. Heart attack

e. Stroke

f. Hypertension

g. Fatty heart

h. Fatty liver

i. Fatty kidneys

j. Gallstones and/or gallbladder disease

k. Degenerative arthritis of hip and knee

l. Hemorrhoids

m. Varicose veins

n. Hyperlipidemia

o. Hernia

p. Enhanced surgical risk

q. Psychosocial disturbances

16. (2 points)

a. Hypoglycemia

b. Dumping syndrome

17. (32 points)

a, c, d, e, g, h, j, k, l, m, o, p

ANSWERS TO TEST

18. Evaluated to the satisfaction of the class instructor (30 points)

19. Evaluated to the satisfaction of the class instructor (42 points)

20. Evaluated to the satisfaction of the class instructor (175 points)

21. Evaluated to the satisfaction of the clinical instructor (80 points)

22. Evaluated to the satisfaction of the clinical instructor (75 points)

MODIFICATIONS IN LIPIDS
UNIT VIII

UNIT OBJECTIVE

After completing this unit, the student should be able to apply the principles of diet therapy in disease conditions that require modifications in lipids. This knowledge will be shown by completing the assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with modifications in lipids to their correct definitions.
2. List conditions that may require modification in lipids.
3. Discuss relationship of diet to gallbladder conditions.
4. Describe a cholecystogram test meal and its administration.
5. State dietary modification for gallbladder conditions.
6. Distinguish between foods allowed and foods avoided on a fat-restricted diet.
7. Select from a list risk factors associated with atherosclerosis.
8. Match diet modifications to types of hyperlipoproteinemias.
9. Distinguish between foods high in cholesterol and foods low in cholesterol.
10. Distinguish between foods high in saturated fats or polyunsaturated fats.
11. Distinguish between foods allowed and foods avoided on a Type IIa hyperlipoproteinemia diet.
12. Distinguish between foods allowed and foods avoided on a Type IV hyperlipoproteinemia diet.
13. Write a meal plan for a cholecystogram test diet.
14. Make lipid modifications in a regular diet.

MODIFICATIONS IN LIPIDS
UNIT VIII

SUGGESTED ACTIVITIES

I. Suggested activities

  A. Order materials to supplement unit.

    1. Films

      a. *Coronary Heart Disease.* Color, 5 minutes, 16 mm, sound. Available from Oklahoma Heart Association, P.O. Box 11376, Oklahoma City, Oklahoma 73136. (Free film)

      (NOTE: Live photography, animated drawings, and excellent diagrams illustrate the structure of the coronary arteries, how they nourish the heart, and what happens when a heart attack occurs.)

      b. *Eat to Your Heart's Content.* Color, 20 minutes, 16 mm, sound. Available from Oklahoma Heart Association, P.O. Box 11376, Oklahoma City, Oklahoma 73136.

    2. Pamphlets

    (NOTE: The following pamphlets are available from the Oklahoma Heart Association, P.O. Box 11376, Oklahoma City, Oklahoma 73136.)

      a. *For a Healthy Heart*

      b. *The Way to Man's Heart — Fat Controlled, Low Cholesterol Meal Plan*

      c. *Recipes — Fat Controlled, Low Cholesterol Meals*

  B. Make transparencies.

  C. Provide students with objective sheet.

  D. Provide students with information and assignment sheets.

  E. Discuss unit and specific objectives.

  F. Discuss information and assignment sheets.

  G. Develop appropriate learning activities for special needs students.

  H. Review information on fats in Section B, Unit I, "Functions and Sources of Nutrients."

SUGGESTED ACTIVITIES

- I. Ask students to bring labels from margarine, nondairy creamers, and other products to compare for use on Type IIa and Type IV hyperlipoproteinemia diets.
- J. Invite a representative of the Heart Association to bring a display of pamphlets, cookbooks, and other educational materials they have available.
- K. Write the words "Hyperlipidemia" and "Hyperlipoproteinemia" on the chalkboard. Split the words into "Hyper-lipid-emia" and "Hyper-lipo-protein-emia" and explain each section of the words.
- L. Give test.
- M. Reteach if necessary.

II. Instructional materials

- A. Objective sheet
- B. Suggested activities
- C. Information sheet
- D. Transparency masters
  - 1. TM #1 — Triglyceride Molecule
  - 2. TM #2 — Cholesterol Molecule
- E. Class assignment sheets
  - 1. Class Assignment Sheet #1 — Write a Meal Plan for a Cholecystogram Test Diet
  - 2. Class Assignment Sheet #2 — Distinguish Between Foods High in Saturated and Polyunsaturated Fats
  - 3. Class Assignment Sheet #3 — Make Lipid Modifications in a Regular Diet
- F. Answers to class assignment sheets
- G. Clinical Assignment Sheet #1 — Make Lipid Modifications in a Regular Diet
- H. Answers to clinical assignment sheet
- I. Test
- J. Answers to test

SUGGESTED ACTIVITIES

III. Unit references

A. American Dietetic Association. *Handbook of Clinical Dietetics.* New Haven, Connecticut: Yale University Press, 1981.

B. Anderson, L., et al. *Nutrition in Health and Disease,* 17th ed. Philadelphia: J.B. Lippincott Co., 1982.

C. Krause, M.V., and L.K. Mahan. *Food Nutrition and Diet Therapy,* 6th ed. Philadelphia: W.B. Saunders Co., 1979.

D. Livermon, Marjorie, ed. *Oklahoma Diet Manual.* Oklahoma City, Oklahoma: Oklahoma Dietetic Association, 1982.

E. Robinson, C.H. *Basic Nutrition and Diet Therapy,* 4th ed. New York: Macmillan Publishing Co., 1981.

F. Williams, S.R. *Nutrition and Diet Therapy,* 4th ed. St. Louis: C.V. Mosby Co., 1981.

MODIFICATIONS IN LIPIDS
UNIT VIII

INFORMATION SHEET

I. Terms and definitions

  A. Lipid — Fat and fatlike substances

  B. Cholecystitis — Inflammation of gallbladder

  C. Cholelithiasis — Formation of gallstones

  D. Atherosclerosis — Thickening and hardening of inner walls of blood vessels

  (NOTE: The term *arteriosclerosis* may also be used when referring to atherosclerosis.)

  E. Emulsifies — Breaks down large fat globules to smaller particles in intestine

  F. Triglyceride — Fat formed from three molecules of fatty acids attached to one molecule of glycerol (Transparency #1)

  EXAMPLES: Meat fat, most food fats, adipose tissue

  G. Cholesterol — White, waxy substance related to fat, but with a very different chemical structure (Transparency #2)

  H. Hyperlipoproteinemia — Higher-than-normal fat content in blood

  (NOTE: The term *hyperlipidemia* may also be used when referring to hyperlipoproteinemia.)

  I. Lipoprotein — Simple proteins combined with lipid components

  J. Cholecystogram — X ray of gallbladder

II. Conditions that may require modification in lipids

  A. Gallbladder disorders

  EXAMPLES: Cholecystitis, cholelithiasis

  B. Pancreatic disorders

  EXAMPLE: Pancreatitis

  C. Malabsorption syndromes

  EXAMPLES: Chronic pancreatitis, short-gut syndrome

INFORMATION SHEET

D. Atherosclerosis

(NOTE: The accumulation of lipid-containing materials within or beneath the surface of blood vessels may eventually result in a heart attack or stroke.)

III. Relationship of diet to gallbladder conditions

A. Gallbladder concentrates and stores bile

B. Gallbladder contracts to empty bile into small intestine when fat is present

(NOTE: Bile emulsifies fat so that it can be acted upon by fat-splitting enzymes.)

C. Patients may experience discomfort and pain when diseased gallbladder contracts

IV. Cholecystogram test meal and its administration (Class Assignment Sheet #1)

A. Foods avoided

1. Meat
2. Milk or milk products
3. Butter and cream

B. Foods included

1. Vegetables
2. Fruits
3. Dry toast or bread
4. Coffee or tea with sugar

C. Schedule

1. Give test meal the evening before X rays on the following morning
2. Postpone breakfast until after X rays have been taken
3. After X rays, a fatty meal may be given and additional X rays taken

V. Dietary modification for gallbladder conditions — Amount of fat restricted to 40 to 50 grams

(NOTE: This diet may be referred to as a *moderately fat-restricted diet, low-fat diet,* or *gallbladder diet.*)

INFORMATION SHEET

VI. Foods allowed and foods avoided on a fat-restricted diet (Class Assignment Sheet #3; Clinical Assignment Sheet #1)

FOOD	ALLOW OR USE	AVOID
Milk	Skim milk, buttermilk, low-fat yogurt	Whole milk, ice cream, chocolate milk, whole-milk yogurt
Eggs	Only one daily — prepared with no added fat Egg whites	More than one egg daily
Meat	6 ounces daily of lean fish, chicken, turkey, beef, pork, lamb, veal	Fried or fatty meats, bologna, sausage, cold cuts, oil-packed fish or meats, gravies
Fruits and vegetables	All fruits and juices All vegetables prepared without added fat	Avocados, olives
Soups	Fat-free bouillons, homemade skim-milk soups	All canned, dehydrated, or whole-milk soups
Desserts and sweets	Sherbet, gelatin desserts, angel food cake, skim-milk pudding, sugar, jam, jelly, honey, hard candy	Desserts with chocolate, coconut, nuts; commercial bakery goods; ice cream
Fats	3 teaspoons daily of butter, shortening, mayonnaise, oil, or margarine	More than 3 teaspoons daily
Beverages	Coffee, tea, decaffeinated coffee, carbonated beverages	Cream in coffee, cream substitutes, high-fat beverages, milkshakes

INFORMATION SHEET

VII. Risk factors associated with atherosclerosis

- A. Elevated blood lipids

  (NOTE: High dietary intakes of saturated fat and cholesterol have been associated with elevated blood lipids.)

- B. Hypertension
- C. Cigarette smoking
- D. Family history
- E. Lack of exercise
- F. Obesity
- G. Tension and emotional stress

VIII. Diet modifications for types of hyperlipoproteinemias

- A. Type I — Low-fat diet (25 to 30 grams)

  (NOTE: This type of hyperlipoproteinemia is rare.)

- B. Type IIa — Low-cholesterol diet

  (NOTE: Patient has elevated cholesterol blood levels and normal triglyceride levels.)

- C. Type IIb and III — Low-cholesterol diet

  (NOTE: Patient has elevated cholesterol and triglyceride blood levels.)

- D. Type IV
  - 1. Controlled carbohydrate (concentrated sweets restricted)
  - 2. Moderate cholesterol restriction
  - 3. Increased polyunsaturated fat
  - 4. Restricted alcohol

  (NOTE: Patient has elevated triglyceride blood levels, has normal or slightly elevated cholesterol blood levels, and may have an abnormal glucose tolerance.)

INFORMATION SHEET

- E. Type V
  - 1. Low-fat diet
  - 2. Controlled carbohydrate (concentrated sweets restricted)
  - 3. Increased polyunsaturated fat
  - 4. Restricted alcohol

  (NOTE: Patient has extremely high triglyceride blood levels, elevated cholesterol blood level, abnormal glucose tolerance.)

IX. Foods high in cholesterol and foods low in cholesterol

- A. High
  - 1. Egg yolk or whole egg
  - 2. Organ meats

    EXAMPLES: Liver, heart, kidney, brains, sweetbreads
  - 3. Shellfish

    EXAMPLE: Shrimp
  - 4. Animal fats

    EXAMPLES: Meat, fat, milk fat, cream, butter, ice cream, cheese
- B. Low
  - 1. Egg whites
  - 2. Fruits and vegetables
  - 3. Breads and cereals prepared with allowed fats

X. Foods high in saturated fats or polyunsaturated fats (Class Assignment Sheet #2)

- A. Foods high in saturated fat
  - 1. Animal fats
  - 2. Coconut oil
  - 3. Palm oil

INFORMATION SHEET

B. Foods high in polyunsaturated fat

1. Safflower oil
2. Corn oil
3. Sunflower oil
4. Soybean oil
5. Cottonseed oil

(NOTE: Peanut oil and olive oil are monounsaturated fats. Monounsaturated fats do not change blood cholesterol levels.)

INFORMATION SHEET

XI. Foods allowed and foods avoided on a Type IIa hyperlipoproteinemia diet (Class Assignment Sheet #3; Clinical Assignment Sheet #1)

FOOD	ALLOW OR USE	AVOID
Milk	Skim milk, buttermilk, low-fat yogurt	Whole milk, ice cream, chocolate milk, whole-milk yogurt
Eggs	Three whole eggs per week Egg whites or egg substitutes	Any food prepared with eggs
Meat	Lean beef, pork, lamb, veal, chicken, turkey, fish, clams, oysters	High-fat meats, sausage, luncheon meat, wieners, oil-packed fish or canned meat, shrimp, organ meats, gravies
Cheese	Low-fat or imitation cheeses made with polyunsaturated oil	All regular cheese products
Fruits and vegetables	All fruits and vegetables All juices	Any vegetables prepared with cream sauce
Breads and cereals	All breads and cereals prepared with allowed fats	Snack crackers prepared with saturated fat, special breads with saturated fat, commercial bakery goods or mixes
Soups	Any low-fat soups	Canned, dehydrated, or whole-milk soups
Desserts	Angel food cake, sherbet, gelatin desserts, pudding made with skim milk	Any desserts containing saturated fat, eggs, coconut, ice cream, whole milk, chocolate

INFORMATION SHEET

FOOD	ALLOW OR USE	AVOID
Fats	Liquid polyunsaturated vegetable oils, soft margarine made from allowed oils	Animal fats, stick margarine, butter, bacon, olives
Beverages	Tea, coffee, carbonated beverages in moderation	Alcohol without physician's approval

INFORMATION SHEET

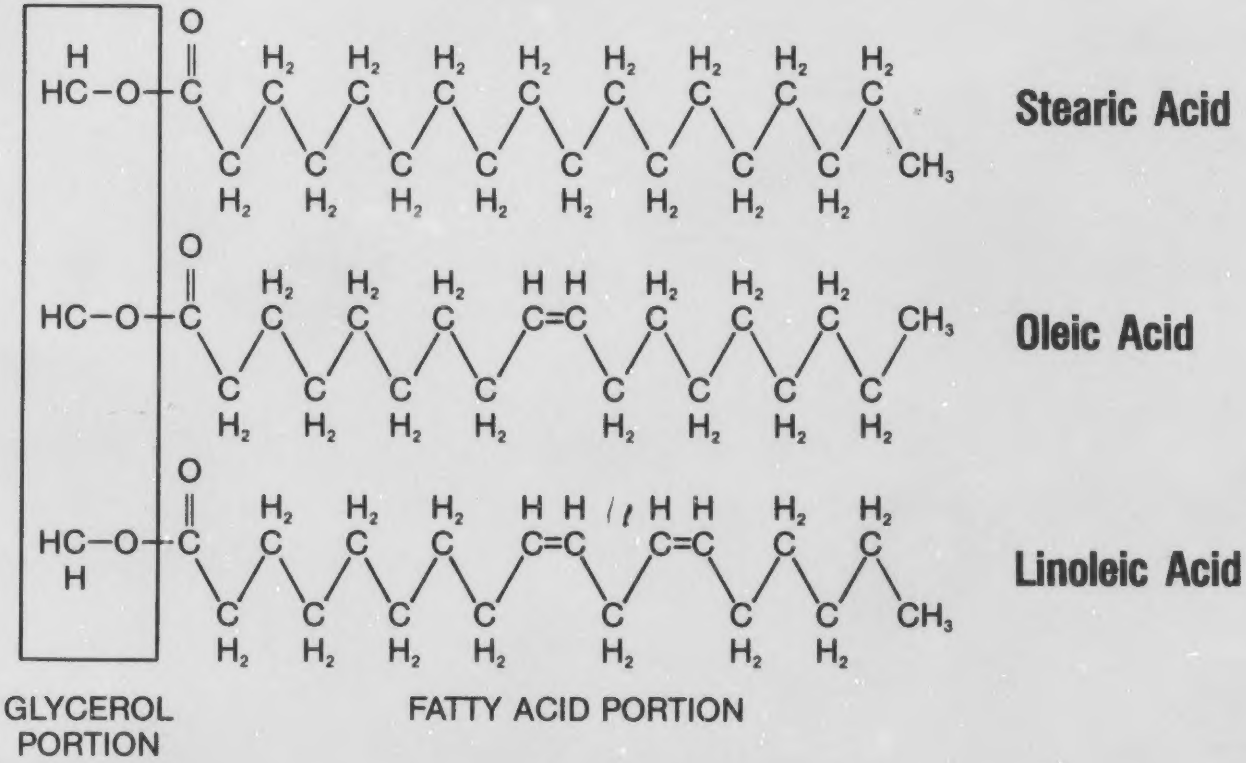
XII. Foods allowed and foods avoided on a Type IV hyperlipoproteinemia diet (Class Assignment Sheet #3; Clinical Assignment Sheet #1)

FOOD	ALLOW OR USE	AVOID
Milk	Skim milk, buttermilk, low-fat yogurt	Whole milk, ice cream, chocolate milk, whole-milk yogurt
Eggs	Three whole eggs per week Egg whites or egg substitutes	Any foods prepared with eggs
Meat	Lean beef, pork, lamb, veal, chicken, turkey, fish, clams, oysters	High-fat meats, sausage, luncheon meats, weiners, oil-packed fish or canned meat, shrimp, organ meats, gravies
Cheese	Low-fat or imitation cheeses made with polyunsaturated oil	All regular cheese products
Fruits and vegetables	Unsweetened fruits or juices All vegetables	All sweetened fruits and juices Any vegetables prepared with cream sauce
Breads and cereals	Breads and cereals except those made with saturated fat	Snack crackers or special breads made with saturated fats, commercial bakery goods, presweetened cereals
Soups	Any low-fat soups	Soups made with whole milk, canned or dehydrated soups

INFORMATION SHEET

FOOD	ALLOW OR USE	AVOID
Desserts and sweets	One per week angel food cake, gelatin, pudding made with skim milk, sherbet, artificially sweetened desserts prepared with polyunsaturated fat	Any desserts containing sugar or fat
Fats	Liquid polyunsaturated vegetable oils, soft margarine made with allowed oils	Animal fats Olive, peanut, sesame, coconut, or palm oils
Beverages	Tea, coffee, artificially sweetened carbonated beverages in moderation	Alcohol without physician's approval

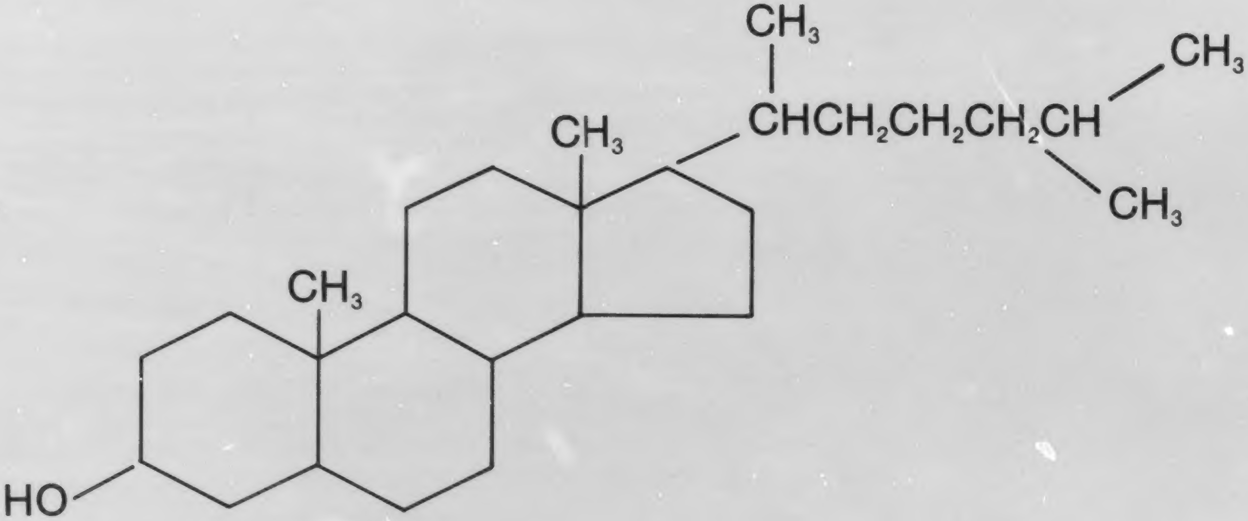
Triglyceride Molecule



Stearic Acid
Oleic Acid
Linoleic Acid
GLYCEROL PORTION
FATTY ACID PORTION

The three fatty acids — stearic (saturated), oleic (monounsaturated), and linoleic (polyunsaturated) — combined in ester linkage with glycerol to form a triglyceride or fat.

Cholesterol Molecule


CH$_3$
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CH$_3$
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CH$_3$
HO

Cholesterol

TM #2

413

414

FSS - 423-B

MODIFICATIONS IN LIPIDS
UNIT VIII

CLASS ASSIGNMENT SHEET #1 — WRITE A MEAL PLAN FOR A CHOLECYSTOGRAM TEST DIET

NAME ______________________ SCORE ____________

A cholecystogram test diet is used for diagnosis of gallbladder conditions. Write a meal plan for a fat-free evening meal and a high-fat meal after the X rays have been taken the next morning.

A. Fat-free evening meal pattern

B. Postpone breakfast until after X rays the next morning

C. High-fat meal after having X rays and before having more X rays taken

(NOTE: The X ray of the gallbladder will not be valid if the patient has been on a clear-liquid diet or has been fasting.)

MODIFICATIONS IN LIPIDS
UNIT VIII

CLASS ASSIGNMENT SHEET #2 — DISTINGUISH BETWEEN FOODS HIGH IN SATURATED AND POLYUNSATURATED FATS

NAME ______________________________ SCORE ______________

Atherosclerosis is a condition characterized by accumulation of lipid-containing materials in the arteries. Dietary recommendations include increasing polyunsaturated fat and lowering saturated fat in the diet.

Distinguish between saturated and polyunsaturated fat in foods by writing an "S" for saturated and a "P" for polyunsaturated in the correct blanks.

_____A. Fat found in meat

_____B. Fat found in luncheon meats, wieners, sausage, bacon

_____C. Coconut oil

_____D. Fat found in vegetable sources, except peanut, olive, sesame, coconut, or palm oils

_____E. Regular stick margarine

_____F. Chocolate

_____G. Special soft margarine (liquid oil listed first on label)

_____H. Fat mainly from animal sources

_____I. Fats that are liquid at room temperature

_____J. Mayonnaise

_____K. Egg yolk or whole egg

_____L. Donuts

_____M. Coconut

_____N. Cheese

_____O. Whole milk and ice cream

_____P. Safflower oil

_____Q. Corn oil

_____R. Sunflower oil

_____S. Lard

MODIFICATIONS IN LIPIDS
UNIT VIII

CLASS ASSIGNMENT SHEET #3 — MAKE LIPID MODIFICATIONS IN A REGULAR DIET

NAME ____ SCORE ________________

Use the diet manual to modify the following regular diet for a gallbladder condition, Type IIa hyperlipoproteinemia, and Type IV hyperlipoproteinemia. Write a complete meal plan, either using the food on the regular diet or substituting a suitable food for the one that cannot be used.

Regular	Low-Fat Gallbladder	Type IIa	Type IV
Breakfast			
EXAMPLE:	Orange juice	Orange juice	Unsweetened orange juice
Orange juice			
Corn flakes			
Poached egg			
Bacon			
Toast			
Butter			
Jelly			
Milk			
Coffee			
Noon Meal			
Roast beef			
Mashed potato			
Gravy			
Buttered peas			
Lettuce salad			
French dressing			
Hot roll			
Butter			
Cherry pie			
Milk			
Coffee			
Evening Meal			
Macaroni and cheese			
Buttered green beans			
Deviled egg salad			
Bread			
Butter			
Vanilla ice cream			
Milk			
Coffee			

MODIFICATIONS IN LIPIDS
UNIT VIII

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

A. Fat-free evening meal pattern

Fruit juice
Fat-free broth
Baked potato
Fat-free cooked peas
Dry toast with jelly
Cherry gelatin dessert
Coffee or tea with sugar
No butter; no cream for coffee

B. Postpone breakfast until after X rays the next morning

C. High-fat meal after having X rays and before having more X rays taken

Corn flakes with cream
Two eggs fried in butter
Two strips bacon
Toast with two pats butter
Whole milk
Coffee with cream

Class Assignment Sheet #2

A.	S
B.	S
C.	S
D.	P
E.	S
F.	S
G.	P
H.	S
I.	P
J.	S
K.	S
L.	S
M.	S
N.	S
O.	S
P.	P
Q.	P
R.	P
S.	S

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #3

Regular	Low-Fat Gallbladder	Type IIa	Type IV
Breakfast			
Orange juice	Orange juice	Orange juice	Unsweetened orange juice
Corn flakes	Corn flakes	Corn flakes	Corn flakes
Poached egg	Poached egg	Egg substitute	Egg substitute
Bacon	No bacon	No bacon	No bacon
Toast	Toast	Toast	Toast
Butter	1 teaspoon butter	Specify soft margarine	Specify soft margarine
Jelly	Jelly	Jelly	Dietetic jelly
Milk	Skim milk	Skim milk	Skim milk
Coffee	Coffee	Coffee	Coffee
Noon Meal			
Roast beef	Lean roast beef	Lean roast beef	Lean roast beef
Mashed potato	Mashed potato	*FF mashed potato	*FF mashed potato
Gravy	No gravy	No gravy	No gravy
Buttered peas	*FF peas	*FF peas	*FF peas
Lettuce salad	Lettuce salad	Lettuce salad	Lettuce salad
French dressing	Lemon wedge	Vinegar & oil dr.	Vinegar & oil dr.
Hot roll	Hot roll	Hot roll	Hot roll
Butter	1 teaspoon butter	Specify soft margarine	Specify soft margarine
Cherry pie	Canned Royal Anne cherries	Canned Royal Anne cherries	Dietetic canned Royal Anne cherries
Milk	Skim milk	Skim milk	Skim milk
Coffee	Coffee	Coffee	Coffee
Evening Meal			
Macaroni and cheese	Sliced chicken	Sliced chicken	Sliced chicken
Buttered green beans	*FF macaroni	*FF macaroni	*FF macaroni
Deviled egg salad	*FF green beans	*FF green beans	*FF green beans
Bread	Sliced tomato salad	Sliced tomato salad	Sliced tomato salad
Butter	Bread	Bread	Bread
Vanilla ice cream	1 teaspoon butter	Specify soft margarine	Specify soft margarine
Milk	Sherbet	Sherbet	Sherbet
Coffee	Skim milk	Skim milk	Skim milk
	Coffee	Coffee	Coffee

*FF — Fat-free (no added butter or fat)

MODIFICATIONS IN LIPIDS
UNIT VIII

CLINICAL ASSIGNMENT SHEET #1 — MAKE LIPID MODIFICATIONS IN A REGULAR DIET

NAME ____ SCORE ________________

Use the diet manual to modify the regular diet in your facility to be suitable for a patient with a gallbladder condition, Type IIa hyperlipoproteinemia, and Type IV hyperlipoproteinemia. Write a complete meal plan for the modification, either using the food on the regular diet or substituting food for the one that cannot be used. Using the regular cycle menu pattern, write your diet modifications on the forms provided for three days.

(NOTE: Use the forms on the following pages.)

CLINICAL ASSIGNMENT SHEET #1
MODIFICATIONS IN LIPIDS
DAY 1

REGULAR	GALLBLADDER DIET	HYPERLIPOPROTEINEMIA DIET TYPE IIa	HYPERLIPOPROTEINEMIA DIET TYPE IV

CLINICAL ASSIGNMENT SHEET #1

MODIFICATIONS IN LIPIDS

DAY 2

REGULAR	GALLBLADDER DIET	HYPERLIPOPROTEINEMIA DIET TYPE IIa	HYPERLIPOPROTEINEMIA DIET TYPE IV

FSS - 435-B

CLINICAL ASSIGNMENT SHEET #1

MODIFICATIONS IN LIPIDS
DAY 3

REGULAR	GALLBLADDER DIET	HYPERLIPOPROTEINEMIA DIET TYPE IIa	HYPERLIPOPROTEINEMIA DIET TYPE IV

MODIFICATIONS IN LIPIDS
UNIT VIII

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

MODIFICATIONS IN LIPIDS
UNIT VIII

TEST

NAME ________________________________ SCORE ______________

1. Match terms associated with modifications in lipids to their correct definitions. Write the correct numbers in the blanks.

______a. Thickening and hardening of inner walls of blood vessels

______b. White, waxy substance related to fat, but with a very different chemical structure

______c. Formation of gallstones

______d. Fat and fatlike substances

______e. Breaks down large fat globules to smaller particles in intestine

______f. Fat formed from three molecules of fatty acids attached to one molecule of glycerol

______g. Inflammation of gallbladder

______h. X ray of gallbladder

______i. Higher-than-normal fat content in blood

______j. Simple proteins combined with lipid components

1. Atheroclerosis
2. Hyperlipoproteinemia
3. Lipid
4. Cholelithiasis
5. Cholesterol
6. Cholecystitis
7. Triglyceride
8. Lipoprotein
9. Emulsifies
10. Cholecystogram

2. List three conditions that may require modification in lipids.

a. ______________________________

b. ______________________________

c. ______________________________

TEST

3. Discuss relationship of diet to gallbladder conditions.

4. Describe a cholecystogram test meal and its administration. Include two items from each of the first two categories and three items from the third category.

   a. Foods avoided

      1) ______________________

      2) ______________________

   b. Foods included

      1) ______________________

      2) ______________________

   c. Schedule

      1) ______________________

      2) ______________________

      3) ______________________

5. State dietary modification for gallbladder conditions.

TEST

6. Distinguish between foods allowed and foods avoided on a fat-restricted diet. Write an "A" in the blanks before foods allowed and an "AV" in the blanks before foods avoided.

______a. Skim milk, buttermilk, low-fat yogurt

______b. Fried or fatty meats, bologna, sausage, cold cuts, oil-packed fish or meats, gravies

______c. Coffee, tea, decaffeinated coffee, carbonated beverages

______d. More than one egg daily

______e. Whole milk, ice cream, chocolate milk, whole-milk yogurt

______f. 6 ounces daily of lean fish, chicken, turkey, beef, pork, lamb, veal

______g. 3 teaspoons daily of butter, shortening, mayonnaise, oil, or margarine

______h. Avocados, olives

______i. All fruits and juices; all vegetables prepared without added fat

______j. Desserts with chocolate, coconut, nuts; commercial bakery goods; ice cream

______k. Fat-free bouillons, homemade skim-milk soups

______l. Sherbet, gelatin desserts, angel food cake, skim-milk pudding, sugar, jam, jelly, honey, hard candy

______m. All canned, dehydrated, or whole-milk soups

7. Select from the following list risk factors associated with atherosclerosis. Write an "X" in the blank before each correct answer.

______a. Family history

______b. Aerobic exercise

______c. Hypertension

______d. Tension and emotional stress

______e. Marathon running

______f. Elevated blood lipids

______g. High fiber intake

TEST

______h. Lack of exercise

______i. Underweight

______j. Obesity

______k. Cigarette smoking

8. Match diet modifications to types of hyperlipoproteinemias. Write the correct numbers in the blanks. Some blanks may have more than one correct answer.

______a. Low-fat diet (25 to 30 grams)

______b. Low-cholesterol diet

______c. Controlled carbohydrate (concentrated sweets restricted); moderate cholesterol restriction; increased polyunsaturated fat; restricted alcohol

______d. Low-fat diet; controlled carbohydrate (concentrated sweets restricted); increased polyunsaturated fat; restricted alcohol

1. Type I
2. Type V
3. Type IIb and III
4. Type IIa
5. Type IV

9. Distinguish between foods high in cholesterol and foods low in cholesterol. Write an "H" in the blanks before foods high in cholesterol and an "L" in the blanks before foods low in cholesterol.

______a. Fruits and vegetables

______b. Organ meats

______c. Egg yolk or whole egg

______d. Breads and cereals prepared with allowed fats

______e. Egg whites

______f. Animal fats

______g. Shellfish

10. Distinguish between foods high in saturated fats or polyunsaturated fats. Write an "S" in the blanks before foods high in saturated fats and a "P" in the blanks before foods high in polyunsaturated fats.

______a. Sunflower oil

______b. Soybean oil

TEST

______c. Animal fats

______d. Safflower oil

______e. Coconut oil

______f. Corn oil

______g. Cottonseed oil

______h. Palm oil

11. Distinguish between foods allowed and foods avoided on a Type IIa hyperlipoproteinemia diet. Write an "A" in the blanks before foods allowed and an "AV" in the blanks before foods avoided.

______a. Skim milk, buttermilk, low-fat yogurt

______b. Any vegetables prepared with cream sauce

______c. Any food prepared with eggs

______d. Three whole eggs per week; egg whites or egg substitutes

______e. Lean beef, pork, lamb, veal, chicken, turkey, fish, clams, oysters

______f. Whole milk, ice cream, chocolate milk, whole-milk yogurt

______g. Low-fat or imitation cheeses made with polyunsaturated oil

______h. All fruits and vegetables; all juices

______i. High-fat meats, sausage, luncheon meat, wieners, oil-packed fish or canned meat, shrimp, organ meats, gravies

______j. All regular cheese products

______k. Snack crackers prepared with saturated fat, special breads with saturated fat, commercial bakery goods or mixes

______l. All breads and cereals prepared with allowed fats

______m. Any low-fat soups

______n. Alcohol without physician's approval

______o. Angel food cake, sherbet, gelatin desserts, pudding made with skim milk

______p. Canned, dehydrated, or whole-milk soups

TEST

______q. Animal fats, stick margarine, butter, bacon, olives

______r. Tea, coffee, carbonated beverages in moderation

______s. Liquid polyunsaturated vegetable oils, soft margarine made from allowed oils

______t. Any desserts containing saturated fat, eggs, coconut, ice cream, whole milk, chocolate

12. Distinguish between foods allowed and foods avoided on a Type IV hyperlipoproteinemia diet. Write an "A" in the blanks before foods allowed and an "AV" in the blanks before foods avoided.

______a. Whole milk, ice cream, chocolate milk, whole-milk yogurt

______b. Tea, coffee, artificially sweetened carbonated beverages in moderation

______c. Any foods prepared with eggs

______d. High-fat meats, sausage, luncheon meats, weiners, oil-packed fish or canned meat, shrimp, organ meats, gravies

______e. One per week angel food cake, gelatin, pudding made with skim milk, sherbet, artificially sweetened desserts prepared with polyunsaturated fat

______f. Any low-fat soups

______g. All regular cheese products

______h. Breads and cereals except those made with saturated fat

______i. Unsweetened fruits or juices; all vegetables

______j. Soups made with whole milk, canned or dehydrated soups

______k. Low-fat or imitation cheeses made with polyunsaturated oil

______l. Snack crackers or special breads made with saturated fats, commercial bakery goods, presweetened cereals

______m. Liquid polyunsaturated vegetable oils, soft margarine made with allowed oils

______n. All sweetened fruits and juices; any vegetables prepared with cream sauce

______o. Skim milk, buttermilk, low-fat yogurt

TEST

______p. Alcohol without physician's approval

______q. Three whole eggs per week; egg whites or egg substitutes

______r. Lean beef, pork, lamb, veal, chicken, turkey, fish, clams, oysters

______s. Any desserts containing sugar or fat

______t. Animal fats; olive, peanut, sesame, coconut, or palm oils

(NOTE: Test questions 13 and 14 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

13. Write a meal plan for a cholecystogram test diet.

14. Make lipid modifications in a regular diet.

MODIFICATIONS IN LIPIDS
UNIT VIII

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 790. The point total for questions 1-12 is 290; the point total for questions 13 and 14 is 500.)

1. (20 points)

   a. 1
   b. 5
   c. 4
   d. 3
   e. 9
   f. 7
   g. 6
   h. 10
   i. 2
   j. 8

2. (3 points)

   Answer should include any three of the following

   a. Gallbladder disorders

   b. Pancreatic disorders

   c. Malabsorption syndromes

   d. Atherosclerosis

3. (9 points)

   Discussion should include the following

   a. Gallbladder concentrates and stores bile

   b. Gallbladder contracts to empty bile into small intestine when fat is present

   c. Patients may experience discomfort and pain when diseased gallbladder contracts

ANSWERS TO TEST

4. (24 points)
    - a. Foods avoided — Description should include any two of the following
        - 1) Meat
        - 2) Milk or milk products
        - 3) Butter and cream
    - b. Foods included — Description should include any two of the following
        - 1) Vegetables
        - 2) Fruits
        - 3) Dry toast or bread
        - 4) Coffee or tea with sugar
    - c. Schedule
        - 1) Give test meal the evening before X rays on the following morning
        - 2) Postpone breakfast until after X rays have been taken
        - 3) After X rays, a fatty meal may be given and additional X rays taken

5. (3 points)

    Amount of fat restricted to 40 to 50 grams

6. (39 points)

    a. A
    b. AV
    c. A
    d. AV
    e. AV
    f. A
    g. A
    h. AV
    i. A
    j. AV
    k. A
    l. A
    m. AV

7. (22 points)

    a, c, d, f, h, j, k

ANSWERS TO TEST

8. (8 points)

a.	1
b.	3, 4
c.	5
d.	2

9. (21 points)

a.	L	e.	L
b.	H	f.	H
c.	H	g.	H
d.	L		

10. (21 points)

a.	P	e.	S
b.	P	f.	P
c.	S	g.	P
d.	P	h.	S

11. (60 points)

a.	A	k.	AV
b.	AV	l.	A
c.	AV	m.	A
d.	A	n.	AV
e.	A	o.	A
f.	AV	p.	AV
g.	A	q.	AV
h.	A	r.	A
i.	AV	s.	A
j.	AV	t.	AV

ANSWERS TO TEST

12. (60 points)

a.	AV	k.	A
b.	A	l.	AV
c.	AV	m.	A
d.	AV	n.	AV
e.	A	o.	A
f.	A	p.	AV
g.	AV	q.	A
h.	A	r.	A
i.	A	s.	AV
j.	AV	t.	AV

13. Evaluated to the satisfaction of the class instructor (50 points)

14. Evaluated to the satisfaction of the clinical instructor (450 points)

COMBINATION DIETS
UNIT IX

UNIT OBJECTIVE

After completing this unit, the student should be able to combine two or more modified diets and recognize diets that cannot be combined. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with combination diets to their correct definitions.
2. State rules for therapeutic diet combinations.
3. Arrange in order steps for combining diets.
4. Distinguish between diets that are frequently combined and diets that cannot be combined.
5. Plan a menu for a 1,500-calorie diabetic, 2-gram sodium diet.
6. Plan a menu for a 1,200-calorie, Type IV hyperlipoproteinemia, surgical soft diet.
7. Compile a list of combination-diet orders.
8. Plan combination-diet menus.

COMBINATION DIETS
UNIT IX

SUGGESTED ACTIVITIES

I. Suggested activities

  A. Order materials to supplement unit — Have extra copies of *Oklahoma Diet Manual.*

  B. Provide students with objective sheet.

  C. Discuss unit and specific objectives.

  D. Provide students with information and assignment sheets.

  E. Discuss information and assignment sheets.

  F. Review "Modifications for Gastrointestinal Conditions,""Modifications in Minerals," "Modifications in Calories and Carbohydrates," and "Modifications in Lipids." These are Units V, VI, VII, and VIII in Section B of this book.

  G. Develop appropriate learning activities for special needs students.

  H. Give test.

  I. Reteach if necessary.

II. Instructional materials

  A. Objective sheet

  B. Suggested activities

  C. Information sheet

  D. Class assignment sheets

    1. Class Assignment Sheet #1 — Plan a Menu for a 1,500-Calorie Diabetic, 2-Gram Sodium Diet

    2. Class Assignment Sheet #2 — Plan a Menu for a 1,200-Calorie, Type IV Hyperlipoproteinemia, Surgical Soft Diet

  E. Answers to class assignment sheets

  F. Clinical assignment sheets

    1. Clinical Assignment Sheet #1 — Compile a List of Combination-Diet Orders

SUGGESTED ACTIVITIES

2. Clinical Assignment Sheet #2 — Plan Combination-Diet Menus

G. Answers to clinical assignment sheets

H. Test

I. Answers to test

III. Unit references

A. Anderson, L., et al. *Nutrition in Health and Disease.* Philadelphia: J.B. Lippincott Co., 1982.

B. Krause, M.V., and L. Mahan. *Food Nutrition and Diet Therapy,* 6th ed. Philadelphia: W.B. Sanders Co., 1979.

C. Livermon, Marjorie, ed. *Oklahoma Diet Manual.* Oklahoma City, Oklahoma: Oklahoma Dietetic Association, 1982.

D. Robinson, C.H. *Basic Nutrition and Diet Therapy,* 4th ed. New York: McMillan Publishing Co., 1981.

E. Williams, S.R. *Nutrition and Diet Therapy,* 4th ed. St. Louis: C.V. Mosby Co., 1981.

COMBINATION DIETS
UNIT IX

INFORMATION SHEET

I. Terms and definitions

- A. Hyperlipoproteinemia (hyperlipidemia) — Higher-than-normal fat content in blood
- B. Therapeutic — Used in treatment of certain conditions
- C. Sodium — Mineral present in food; found in the body mainly in extracellular fluids

  (NOTE: Extracellular fluids are those fluids outside the body cells.)

- D. Potassium — Mineral present in food; found in the body principally in intracellular fluids

  (NOTE: Intracellular fluids are those fluids inside the body cells.)

- E. Fiber — Nondigestible material found in food; provides bulk in diet

II. Rules for therapeutic diet combinations

- A. Diets to be combined must have compatible principles

  EXAMPLES: A bland diet cannot be combined with a high-fiber diet, nor can a surgical soft diet be combined with a high-fiber diet because the principles of the diets are not compatible.

- B. Diet combinations must not be detrimental to patient's health

  EXAMPLE: In patients with renal disease, a low-calorie, low-protein diet would not provide enough calories to spare the protein to be used for tissue building and repair in the body.

III. Steps for combining diets (Class Assignment Sheets #1 and #2; Clinical Assignment Sheets #1 and #2)

- A. Identify and take from diet manual two or more diet plans to be combined
- B. Review principles of each diet plan
- C. Prepare worksheet of foods to use and foods to avoid in each food group, using principles of diets to be combined
- D. Prepare sample meal plan from worksheet prepared for diet combination

INFORMATION SHEET

IV. Diets that are frequently combined and diets that cannot be combined

A. Diets frequently combined

1. Diabetic and low sodium
2. Hyperlipoproteinemia and/or calorie controlled and/or surgical soft
3. Low protein and/or low sodium and/or low potassium
4. Gallbladder and calorie controlled
5. Low sodium and calorie controlled
6. Surgical soft and low sodium

B. Diets that cannot be combined

1. Bland and high fiber

   (NOTE: Foods high in fiber are not allowed on bland diets.)

2. High protein and low sodium

   (NOTE: Foods high in protein are also high in sodium.)

3. Low protein and low calorie for renal disease
4. Low fat and/or low carbohydrate and/or high calorie

   (NOTE: Foods high in fat and carbohydrates are necessary in order to obtain a high-calorie diet.)

5. Surgical soft and high fiber

   (NOTE: Foods high in fiber are omitted from a surgical soft diet.)

6. High protein and gallbladder

   (NOTE: Most foods high in protein are also high in fat.)

7. High protein and clear liquid

   (NOTE: Clear-liquid diets contain little protein since they consist of broth, tea, gelatin desserts, and clear fruit juices.)

COMBINATION DIETS
UNIT IX

CLASS ASSIGNMENT SHEET #1 — PLAN A MENU FOR A 1,500-CALORIE DIABETIC, 2-GRAM SODIUM DIET

NAME ______________________________ SCORE ______________

An aid for combining two or more diets is a worksheet based on foods allowed and foods to avoid for each modification.

PART I

Complete a worksheet of foods to use and foods to avoid, combining the principles of the 1,500-calorie diabetic, 2-gram sodium diet.

Remove copies of the 1,500-calorie diabetic diet meal pattern and the 2-gram sodium diet meal pattern from the diet manual. Complete the worksheet with lists of foods that can be used and those that must be avoided on both diets.

WORKSHEET FOR DIET COMBINATIONS

TYPE OF DIET: ______________________________

TYPES OF FOODS AND AMOUNTS	USE	AVOID
MILK		
EGG		
MEAT, FISH, POULTRY		
CHEESE		

CLASS ASSIGNMENT SHEET #1

TYPES OF FOODS AND AMOUNTS	USE	AVOID
POTATO OR POTATO SUBSTITUTE		
VEGETABLES		
FRUITS		
DESSERTS		
BREAD		
CEREAL		
FATS		
MISCELLANEOUS		

FSS - 459-B

CLASS ASSIGNMENT SHEET #1

PART II

On the form below write a sample menu using foods allowed on both diets that are being combined.

SAMPLE MENU

TYPE OF DIET: ____________________

	EXCHANGES	**FOODS**
BREAKFAST		
NOON MEAL		

460-B

CLASS ASSIGNMENT SHEET #1

SAMPLE MENU

	EXCHANGES	**FOODS**
EVENING MEAL		
BEDTIME SNACK		

COMBINATION DIETS
UNIT IX

CLASS ASSIGNMENT SHEET #2 — PLAN A MENU FOR A 1,200-CALORIE, TYPE IV HYPERLIPOPROTEINEMIA, SURGICAL SOFT DIET

NAME ______________________________ SCORE ______________

When combining three diet modifications, you may find a worksheet helpful in summarizing foods allowed and foods to avoid for each modification.

PART I

Complete a worksheet of foods to use and foods to avoid that combines the principles of the 1,200-calorie, Type IV hyperlipoproteinemia, and surgical soft diets.

Remove copies of the 1,200-calorie, Type IV hyperlipoproteinemia, and surgical soft diet meal patterns from the diet manual. Complete the lists of foods that can be used and those that must be avoided on all diets being combined.

WORKSHEET FOR DIET COMBINATIONS

TYPE OF DIET: ______________________________

TYPES OF FOODS AND AMOUNTS	USE	AVOID
MILK		
EGG		
MEAT, FISH, POULTRY		
CHEESE		

CLASS ASSIGNMENT SHEET #2

TYPES OF FOODS AND AMOUNTS	USE	AVOID
POTATO OR POTATO SUBSTITUTE		
VEGETABLES		
FRUITS		
DESSERTS		
BREAD		
CEREAL		
FATS		
MISCELLANEOUS		

FSS - 463-B

CLASS ASSIGNMENT SHEET #2

PART II

On the form below write a sample menu using foods allowed on both diets that are being combined.

SAMPLE MENU

TYPE OF DIET: ______________________________

	EXCHANGES	FOODS
BREAKFAST		
NOON MEAL		

464-B

CLASS ASSIGNMENT SHEET #2

SAMPLE MENU

	EXCHANGES	**FOODS**
EVENING MEAL		
BEDTIME SNACK		

COMBINATION DIETS
UNIT IX

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1 — Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #2 — Evaluated to the satisfaction of the class instructor

FSS - 467-B

COMBINATION DIETS
UNIT IX

CLINICAL ASSIGNMENT SHEET #1 — COMPILE A LIST OF COMBINATION-DIET ORDERS

NAME ______________________________ SCORE ______________

Review the diet orders currently prescribed for residents in your facility.

A. Compile a list of all combination-diet orders in the space provided.

COMBINATION-DIET ORDERS

____

____

____

____

____

____

____

____

B. Are all of the diet orders compatible? If not, what should you do?

____

____

____

____

____

____

____

____

FSS - 469-B

COMBINATION DIETS
UNIT IX

CLINICAL ASSIGNMENT SHEET #2 — PLAN COMBINATION-DIET MENUS

NAME ______________________________ SCORE ________________

From the list of combination-diet orders compiled in Clinical Assignment Sheet #1, have the clinical instructor assign five different combination diets. Remove copies from the diet manual of meal patterns for diets that are to be combined. For each part of the five combination diets, prepare a worksheet of foods to use and foods to avoid; then write diet modifications for one day. Use the regular diet and modify it to meet the combination diet. Visit the patients to determine food preferences and individualize the diets accordingly.

CLINICAL ASSIGNMENT SHEET #2

WORKSHEET FOR DIET COMBINATIONS

TYPE OF DIET: ______________________________

TYPES OF FOODS AND AMOUNTS	USE	AVOID
MILK		
EGG		
MEAT, FISH, POULTRY		
CHEESE		
POTATO OR POTATO SUBSTITUTE		

FSS - 471-B

CLINICAL ASSIGNMENT SHEET #2

TYPES OF FOODS AND AMOUNTS	USE	AVOID
VEGETABLES		
FRUITS		
DESSERTS		
BREAD		
CEREAL		
FATS		
MISCELLANEOUS		

472-B

CLINICAL ASSIGNMENT SHEET #2

SAMPLE MENU

TYPE OF DIET: ____________________

	EXCHANGES	FOODS
BREAKFAST		
NOON MEAL		

FSS - 473-B

CLINICAL ASSIGNMENT SHEET #2

SAMPLE MENU

	EXCHANGES	FOODS
EVENING MEAL	________	________
	________	________
	________	________
	________	________
	________	________
	________	________
	________	________
	________	________
	________	________
BEDTIME SNACK	________	________
	________	________
	________	________
	________	________
	________	________
	________	________
	________	________
	________	________
	________	________

474-B

CLINICAL ASSIGNMENT SHEET #2

WORKSHEET FOR DIET COMBINATIONS

TYPE OF DIET: ____________________

TYPES OF FOODS AND AMOUNTS	USE	AVOID
MILK		
EGG		
MEAT, FISH, POULTRY		
CHEESE		
POTATO OR POTATO SUBSTITUTE		

CLINICAL ASSIGNMENT SHEET #2

TYPES OF FOODS AND AMOUNTS	USE	AVOID
VEGETABLES		
FRUITS		
DESSERTS		
BREAD		
CEREAL		
FATS		
MISCELLANEOUS		

476-B

CLINICAL ASSIGNMENT SHEET #2

SAMPLE MENU

TYPE OF DIET: ____________________

	EXCHANGES	**FOODS**
BREAKFAST		
NOON MEAL		

FSS - 477-B

CLINICAL ASSIGNMENT SHEET #2

SAMPLE MENU

	EXCHANGES	**FOODS**
EVENING MEAL		
BEDTIME SNACK		

CLINICAL ASSIGNMENT SHEET #2

WORKSHEET FOR DIET COMBINATIONS

TYPE OF DIET: ______________________________

TYPES OF FOODS AND AMOUNTS	**USE**	**AVOID**
MILK		
EGG		
MEAT, FISH, POULTRY		
CHEESE		
POTATO OR POTATO SUBSTITUTE		

CLINICAL ASSIGNMENT SHEET #2

TYPES OF FOODS AND AMOUNTS	USE	AVOID
VEGETABLES		
FRUITS		
DESSERTS		
BREAD		
CEREAL		
FATS		
MISCELLANEOUS		

480-B

CLINICAL ASSIGNMENT SHEET #2

SAMPLE MENU

TYPE OF DIET: ______________________________

	EXCHANGES	**FOODS**
BREAKFAST		
NOON MEAL		

FSS - 481-B

CLINICAL ASSIGNMENT SHEET #2

SAMPLE MENU

EXCHANGES **FOODS**

EVENING MEAL

BEDTIME SNACK

CLINICAL ASSIGNMENT SHEET #2

WORKSHEET FOR DIET COMBINATIONS

TYPE OF DIET: ____________________________

TYPES OF FOODS AND AMOUNTS	USE	AVOID
MILK		
EGG		
MEAT, FISH, POULTRY		
CHEESE		
POTATO OR POTATO SUBSTITUTE		

FSS - 483-B

CLINICAL ASSIGNMENT SHEET #2

TYPES OF FOODS AND AMOUNTS	USE	AVOID
VEGETABLES		
FRUITS		
DESSERTS		
BREAD		
CEREAL		
FATS		
MISCELLANEOUS		

CLINICAL ASSIGNMENT SHEET #2

SAMPLE MENU

TYPE OF DIET: ____________________

	EXCHANGES	**FOODS**
BREAKFAST		
NOON MEAL		

FSS - 485-B

CLINICAL ASSIGNMENT SHEET #2

SAMPLE MENU

	EXCHANGES	**FOODS**
EVENING MEAL		
BEDTIME SNACK		

CLINICAL ASSIGNMENT SHEET #2

WORKSHEET FOR DIET COMBINATIONS

TYPE OF DIET: ____________________

TYPES OF FOODS AND AMOUNTS	USE	AVOID
MILK		
EGG		
MEAT, FISH, POULTRY		
CHEESE		
POTATO OR POTATO SUBSTITUTE		

FSS - 487-B

CLINICAL ASSIGNMENT SHEET #2

TYPES OF FOODS AND AMOUNTS	USE	AVOID
VEGETABLES		
FRUITS		
DESSERTS		
BREAD		
CEREAL		
FATS		
MISCELLANEOUS		

CLINICAL ASSIGNMENT SHEET #2

SAMPLE MENU

TYPE OF DIET: ____________________

	EXCHANGES	FOODS
BREAKFAST		
NOON MEAL		

FSS - 489-B

CLINICAL ASSIGNMENT SHEET #2

SAMPLE MENU

	EXCHANGES	**FOODS**
EVENING MEAL		
BEDTIME SNACK		

COMBINATION DIETS
UNIT IX

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

FSS - 493-B

COMBINATION DIETS
UNIT IX

TEST

NAME ____ SCORE ________________

1. Match terms associated with combination diets to their correct definitions. Write the correct numbers in the blanks.

_____a. Mineral present in food; found in the body mainly in extracellular fluids

_____b. Higher-than-normal fat content in blood

_____c. Used in treatment of certain conditions

_____d. Mineral present in food; found in the body principally in intracellular fluids

_____e. Nondigestible material found in food; provides bulk in diet

1. Therapeutic
2. Sodium
3. Fiber
4. Potassium
5. Hyperlipoproteinemia (hyperlipidemia)

2. State rules for therapeutic diet combinations.

a. ____

b. ____

3. Arrange in order steps for combining diets. Place a "1" before the first step, a "2" before the second step, and so on.

_____a. Prepare worksheet of foods to use and foods to avoid in each food group, using principles of diets to be combined

_____b. Identify and take from diet manual two or more diet plans to be combined

_____c. Prepare sample meal plan from worksheet prepared for diet combination

_____d. Review principles of each diet plan

4. Distinguish between diets that are frequently combined and diets that cannot be combined. Write a "C" before diets frequently combined and an "NC" before diets that cannot be combined.

_____a. Diabetic and low sodium

_____b. High protein and low sodium

TEST

______c. High protein and clear liquid

______d. Low sodium and calorie controlled

______e. Bland and high fiber

______f. Surgical soft and low sodium

______g. High protein and gallbladder

______h. Low fat and/or low carbohydrate and/or high calorie

______i. Hyperlipoproteinemia and/or calorie controlled and/or surgical soft

______j. Low protein and low calorie for renal disease

______k. Surgical soft and high fiber

______l. Low protein and/or low sodium and/or low potassium

______m. Gallbladder and calorie controlled

(NOTE: Test questions 5-8 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

5. Plan a menu for a 1,500-calorie diabetic, 2-gram sodium diet.
6. Plan a menu for a 1,200-calorie, Type IV hyperlipoproteinemia, surgical soft diet.
7. Compile a list of combination-diet orders.
8. Plan combination-diet menus.

COMBINATION DIETS
UNIT IX

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 619. The point total for questions 1-4 is 69; the point total for questions 5-8 is 550.)

1. (10 points)

   a. 2
   b. 5
   c. 1
   d. 4
   e. 3

2. (4 points)

   a. Diets to be combined must have compatible principles
   b. Diet combinations must not be detrimental to patient's health

3. (16 points)

   a. 3
   b. 1
   c. 4
   d. 2

4. (39 points)

   a. C
   b. NC
   c. NC
   d. C
   e. NC
   f. C
   g. NC
   h. NC
   i. C
   j. NC
   k. NC
   l. C
   m. C

ANSWERS TO TEST

5. Evaluated to the satisfaction of the class instructor (75 points)

6. Evaluated to the satisfaction of the class instructor (75 points)

7. Evaluated to the satisfaction of the clinical instructor (25 points)

8. Evaluated to the satisfaction of the clinical instructor (375 points)

COMMUNICATION SKILLS
UNIT X

UNIT OBJECTIVE

After completing this unit, the student should be able to use effective communication skills and to develop good rapport with people. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with communication skills to their correct definitions.
2. Describe effective communication.
3. Match paths of communication in a health care facility to specific examples of their uses.
4. Select from a list techniques for improved communication.
5. Select from a list barriers to effective communication.
6. State ways of overcoming communication barriers.
7. Select from a list techniques for handling complaints.
8. Discuss basic elements of a good interview.
9. Select from a list techniques of interviewing.
10. Match retention percentages to ways people learn.
11. Name types of media.
12. Select from a list uses of media in communication.
13. Select from a list communication skills needed in nutritional counseling.
14. Make recommendations to improve communication.
15. Use appropriate techniques for handling complaints and/or grievances.
16. Make recommendations to improve listening skills.
17. Conduct in-service class on communication skills.
18. Evaluate use of nonverbal communication skills.
19. Obtain diet histories.
20. Demonstrate nutritional counseling skills.

COMMUNICATION SKILLS
UNIT X

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Order films to supplement unit.

      1. *You're Not Listening!* Color, 16 mm, 21 minutes, 1978. Available from University of Illinois Film Center, 1325 South Oak Street, Champaign, Illinois 61820, 217/333-1360. Rental fee required. Order number 56063.

         (NOTE: A Shakespearean actor leads viewers through a series of humorous and thought-provoking vignettes that illustrate techniques for building seven basic listening skills: eye contact, control of one's mouth, becoming an observer, good thinking, not jumping to conclusions, avoiding prejudice, and working to keep an open mind. The film stresses that with hard work and practice anyone can become a good listener.)

      2. *The Interview Film: What to Know and What to Do.* Color, 16 mm, 21 minutes, 1977. Available from University of Illinois Film Center, 1325 South Oak Street, Champaign, Illinois 61820, 211/333-1360. Rental fee required. Order number 56195.

         (NOTE: This film analyzes and dramatizes the interview procedure from the point of view of the employer. It shows five candidates for a position [cashier in a restaurant chain] and the interview procedure while enumerating the elements that provide the interviewer with clues for rating and comparison.)

      3. *A Communications Primer.* Color, 16 mm, 22 minutes, 1953. Available from University of Illinois Film Center, 1325 South Oak Street, Champaign, Illinois 61820, 217/333-1360. Rental fee required. Order number 83960.

         (NOTE: This film shows Charles and Ray Eames' popular presentation of communications theory. It encourages the use of verbal, nonverbal, and mechanical means of communication in the worlds of architecture and planning. The music was composed and conducted by Elmer Bernstein.)

      4. *Communications Fundamentals: Five Basic Skills.* Color, 16 mm, 16 minutes, 1977. Available from University of Illinois Film Center, 1325 South Oak Street, Champaign, Illinois 61820, 217/333-1360. Rental fee required. Order number 55683.

         (NOTE: This film introduces and illustrates the many ways in which we communicate, and it emphasizes the fact that developing proper communication skills is essential for successful living. Through a series of humorous and relevant skits, viewers learn that communication consists of five basic types of skills: reading, writing, speaking, listening, and nonverbal communication. The skills are defined for primary and intermediate level, and the importance of each is vividly demonstrated by Big Al and Company.)

SUGGESTED ACTIVITIES

B. Make transparencies.

C. Provide students with objective sheet.

D. Provide students with information and assignment sheets.

E. Discuss unit and specific objectives.

F. Discuss information and assignment sheets.

G. Read the following directions to the class so that they may complete Part I of Class Assignment Sheet #1.

1. Box 2: Place a dot on the letter "i."
2. Box 2: Print the letters of the word "xerox" in the blank spaces.
3. Box 3: I saw a papa bull (PB), a mama bull (MB), and a baby bull (BB) in the barnyard. Circle the one that does not belong.
4. There are four words in this box. Circle one that belongs.

H. After students have sketched their versions of the animal described in Class Assignment Sheet #2, tell them what animal they were to have drawn. Have available an illustration of an aardvark for the students to see.

I. Develop appropriate learning activities for special needs students.

J. Review "Basic Communication Skills," *Food Service Worker,* Section E, Unit II.

K. Have students role play nonverbal communication, such as facial expression, body language, tone of voice.

L. Have students list nonverbal communication they receive from patients, such as position of sheet on their body, eye contact, pretending to be asleep, and so on.

M. Invite speech teacher from local high school to talk to class about effective communication.

N. Have each student present a three-minute talk to class. Have class analyze each speaker's communication techniques.

O. Teach use of audiovisual equipment commonly used in health care facilities: slide projector, 16-mm film projector, tape recorder.

P. Discuss the health care facility communication problems of rumor and gossip.

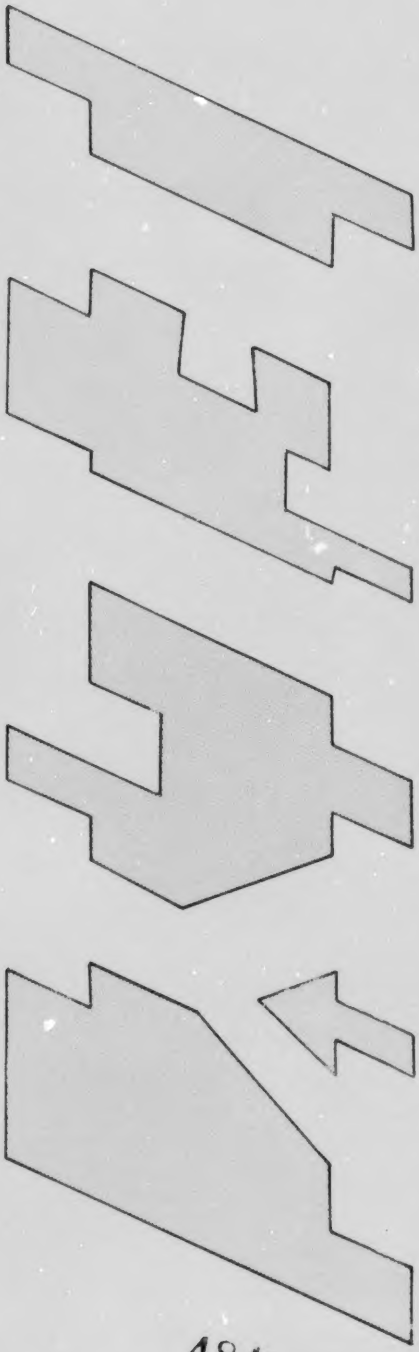
SUGGESTED ACTIVITIES

Q. Use the following exercise to demonstrate how a preconceived notion can block simple communication.

1. Give each student a copy of Figure 1 (following page).
2. Instruct students to turn the page so that the arrow points toward them.
3. Ask those who can read the illustration to raise their hands.
4. Discuss as a class the following questions.
    a. Can everyone see the word *FLY*?
    b. Preconceived notions are common to most of us. Can you share with the class an incident in which such notions may have caused some communication problem?
    c. Adults have more difficulty with this illustration than children. Is it because they have "learned" to read black print on white paper?
    d. What other barriers cause problems in communications?
    e. What do you consider one of the most important skills you can learn to improve your interpersonal relationships?

SUGGESTED ACTIVITIES

FIGURE 1



SUGGESTED ACTIVITIES

R. Use the following activity to illustrate communication skills necessary in teaching.

1. The instructor will role play the part of the employee. A volunteer from the class will be the communicator. There can be no questions asked during this role play. Lay a jacket on the table. The class member is to teach you how to put on the jacket, using communication skills learned in this unit. You have never seen a jacket before. You do not know the pocket from the collar. Be a slow learner so that the class member will have to use good communication to get the job accomplished.

2. Discuss the following with the class: One danger of communication is assuming that the employee or co-worker has the same background knowledge we have and that they understand the words we are using. What is common, everyday vocabulary to us may be quite foreign to a new employee. What is a "simple" task to us may be difficult to someone else. One-way communication is a common fault. We do the "lecturing," assuming that the receiver is understanding every word we say. We do not allow questioning. There is minimal progress with this type of communication.

3. Repeat the task in 1 — teaching the instructor to put on the jacket. This time the instructor, playing the role of the employee, is to interact with the communicator by asking questions to clarify the message.

   (NOTE: The task will be accomplished more easily with this type of communication. Feedback allows the communicator to gauge the receiver's progress and understanding.)

4. Discuss with the class ways in which communication was improved by encouraging the listener to ask questions that clarify the message.

S. Give test.

T. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Transparency masters

1. TM #1 — Communicating
2. TM #2 — Simple Communication
3. TM #3 — Communication Routes
4. TM #4 — Daily Communication
5. TM #5 — Techniques for Improved Communication
6. TM #6 — Confucius

SUGGESTED ACTIVITIES

E. Class assignment sheets

  1. Class Assignment Sheet #1 — Practice Listening Skills

  2. Class Assignment Sheet #2 — Make Recommendations to Improve Communication

  3. Class Assignment Sheet #3 — Use Appropriate Techniques for Handling Complaints and/or Grievances

F. Answers to class assignment sheets

G. Clinical assignment sheets

  1. Clinical Assignment Sheet #1 — Make Recommendations to Improve Listening Skills

  2. Clinical Assignment Sheet #2 — Conduct In-Service Class on Communication Skills

  3. Clinical Assignment Sheet #3 — Analyze Voice Qualities

  4. Clinical Assignment Sheet #4 — Evaluate Use of Nonverbal Communication Skills

  5. Clinical Assignment Sheet #5 — Obtain Diet Histories

  6. Clinical Assignment Sheet #6 — Demonstrate Nutritional Counseling Skills

H. Answers to clinical assignment sheets

I. Test

J. Answers to test

III. Unit references

A. Halloran, Jack. *Applied Human Relations: An Organizational Approach.* Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1978.

B. Knoll, Anne P. *Food Service Management: A Human Relations Approach.* New York: McGraw-Hill Book Company, 1976.

C. Robinson, C. H. *Basic Nutrition and Diet Therapy.* New York: McMillan Publishing Company, 1980.

D. Rogers, Helen V., and Ann Benson. *Practical Nursing I,* rev. by Jamee Reid Sloan. Stillwater, Oklahoma: State Department of Vocational and Technical Education/Curriculum and Instructional Materials Center, 1976.

E. Strauss, George, and Leonard Sayles. *Personnel, The Human Problems of Management,* 4th ed. Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1980.

COMMUNICATION SKILLS
UNIT X

INFORMATION SHEET

I. Terms and definitions

A. Critique — Critical evaluation

(NOTE: This approach uses constructive criticism to improve communication or work methods.)

B. Diet history — Information about nourishment an individual routinely takes; usually obtained by interview

(NOTE: A diet history is used in evaluating nutritional status. Discovering the regular eating pattern of a patient will make it easier to plan nutritional care for that individual.)

C. Empathy — Ability to share another's emotions and/or feelings

D. Grievance — Circumstance that is grounds for complaint or resentment

E. Interview — A face-to-face meeting of people to receive and/or gather information

EXAMPLE: Diet history

(NOTE: An interview includes more than just questioning a job applicant.)

F. Media — Instructional aids involving the use of the senses of sight and/or hearing; singular, *medium*

EXAMPLES: Films, cassettes, posters

G. Moralizing — Speaking about matters of right and wrong, often in a self-righteous way

H. Nutritional counseling — Process whereby an individual is led to modify his or her diet according to a physician's prescription

EXAMPLE: Diet instruction

(NOTE: The most effective counseling consists of several sessions to allow the patient an opportunity to absorb information and to raise questions.)

I. Open-ended questions — Questions that cannot be answered "yes" or "no"

(NOTE: These questions encourage the other person to talk.)

J. Receiver — Listener

K. Sensitivity — Ability to receive and respond to another's needs and/or experience

INFORMATION SHEET

II. Effective communication (Class Assignment Sheets #1 and #2; Clinical Assignment Sheets #1, #3, and #4)

   A. Consists of giving and receiving information (Transparencies #1 and #2)

      1. Sender

      2. Message

      3. Receiver

   B. Follows routes or lines (Transparency #3)

      1. To management

      2. To patients and/or colleagues

      3. To employees

   C. Includes several factors (Transparency #4)

      1. Listening

         EXAMPLE: Use of audiovisuals and other media

      2. Speaking

         EXAMPLE: Conducting meetings

      3. Reading

      4. Writing

   D. Consists of two types

      1. Verbal

      2. Nonverbal

III. Uses of paths of communication in a health care facility

   A. Among employees

      1. Telephone messages

      2. Conversation

      3. Requests for assistance

INFORMATION SHEET

B. Between supervisors and employees

 1. Food production sheets

 2. Job descriptions

 3. Work schedules

C. Between administration and employees

 1. Policies

 2. Grievances

D. Among departments

 1. Diet orders

 2. Maintenance repair requests

 3. Requisitions from storeroom

E. Between patients and employees

 1. Delivering trays

 2. Busing dishes in dining room

IV. Techniques for improved communication (Transparency #5; Clinical Assignment Sheets #1-#3)

A. Be sensitive to receiver

EXAMPLE: You notice that an employee is unusually quiet and has a distressed look on his face. You might say, "You seem upset, Bob. Can you tell me why?"

B. Be aware of symbolic meanings

EXAMPLE: "That was cool" may mean *lukewarm* to someone over fifty but *excellent* to someone who is twenty.

C. Time communications carefully

(NOTE: Avoid communication when you are angry.)

D. Avoid leading questions

EXAMPLE: "Of course you prefer whole to skim milk, don't you?"

INFORMATION SHEET

E. Use feedback

EXAMPLES: "And then what did you do?" or "You were saying--"

(NOTE: Use open-ended comments or questions that invite the other person to talk.)

F. Practice face-to-face communication

(NOTE: Face-to-face communication is preferred because the speaker and receiver can read nonverbal cues.)

G. Observe nonverbal cues

EXAMPLES: Touching, facial expression, body language

(NOTE: An estimated 65 percent of communication is nonverbal.)

H. Listen attentively

(NOTE: The average rate of speech is 100 to 200 words per minute, but we think and listen almost ten times that speed, at 1,000 to 2,000 words per minute. Concentrate so that your mind does not wander.)

I. Use simple language

(NOTE: Talk in words that people can understand.)

J. Practice repetition

EXAMPLE: Please send Mrs. Williams skim milk. That is skim milk for Mrs. Williams in 204.

(NOTE: Repeat the message to assure that it is received as intended. In giving directions, it is wise to repeat them several times, perhaps in different ways, to guarantee successful communication.)

V. Barriers to effective communication

(NOTE: Sometimes physical barriers such as poor phone connections or bad handwriting cause communication breakdowns, but communication barriers are usually the result of sociological and/or psychological barriers.)

A. Hearing what we expect to hear

B. Misunderstanding the message

(NOTE: A message is not always understood exactly as intended. To ensure understanding, ask the receiver to repeat the message.)

INFORMATION SHEET

C. Choosing points that support existing beliefs and ignoring those that do not

(NOTE: We resist new ideas or change, particularly if they conflict with what we already believe.)

D. Misinterpreting message

(NOTE: Words mean different things to different people.)

EXAMPLE: "As soon as you can" means "right now" to some people, but "when you can do it without interfering with your work" to others.

E. Interpreting message in terms of our background and experience

(NOTE: Many times we prejudge people by our past experiences. We tend to stereotype people by characteristics.)

F. Interpreting message in terms of our self-interests

EXAMPLE: Administrator — Good news! Every bed is occupied, which means more income.
Employee — Bad news! Every bed is occupied, which means more work.

G. Allowing moods to affect communication

(NOTE: If we are in a good mood, we communicate more effectively.)

H. Not stating message clearly or specifically

(NOTE: Improper transmission of the message can cause confusion.)

EXAMPLE: "Please send some tea to the nourishment station." (Those at the nourishment station needed quart-sized tea bags, but the employee sent one glass of iced tea.)

VI. Ways of overcoming communication barriers

A. Communicate honestly

B. Use verbal and nonverbal feedback

C. Keep your promises

EXAMPLE: Back up your verbal behavior with action.

D. Use multiple channels of communication

EXAMPLE: Follow verbal agreement with written documentation.

INFORMATION SHEET

E. Appeal to human needs

(NOTE: People tend to listen to messages that show promise of satisfying an active need.)

EXAMPLE: The need for security

VII. Techniques for handling complaints (Class Assignment Sheet #3)

(NOTE: An employee who is concentrating on a grievance is not productive. A patient and/or visitor who has a complaint that is not given attention can create very poor public relations for the health care facility.)

A. Be fair and just

(NOTE: Let it be understood that complaints can be expressed openly and will be dealt with fairly.)

B. Allow others to express their point of view thoroughly

C. Admit and correct your mistakes

(NOTE: Avoid being defensive!)

D. Collect all the facts

E. Avoid argument

(NOTE: Maintain a friendly attitude.)

F. When a legitimate complaint is heard, correct the situation

(NOTE: When discontent is present, there is misunderstanding, rumor, misinterpretation, and distortion.)

G. Treat employees' complaints or grievances as a private matter

(NOTE: Never discuss grievances in front of other employees.)

VIII. Basic elements of a good interview (Clinical Assignment Sheet #5)

A. Purpose — Goals should be clearly in mind of interviewer

B. Privacy — There should be no feeling that one is being heard by others

EXAMPLE: Go into the office and shut the door.

INFORMATION SHEET

C. Rapport — Attempts should be made to establish harmonious and trusting relationships

D. Proper environment

1. Location should be physically comfortable for both interviewer and person being interviewed

   EXAMPLES: Comfortable chairs and good place to write

2. Distractions should be minimal

   EXAMPLES: No or few phone calls or people interrupting, no excessive note taking by the interviewer, no television or radio

IX. Techniques of interviewing (Clinical Assignment Sheet #5)

A. Encourage other person to talk and express feelings

(NOTE: Listen carefully, don't talk! You have two ears and only one tongue so you should listen twice as much as you talk. Encourage others to release feelings because emotions color facts. Avoid criticizing, moralizing, or arguing.)

B. Try to summarize the other person's ideas

(NOTE: Often people are surprised to learn what their words have meant to someone else.)

C. Listen with empathy

(NOTE: Put yourself in the other person's shoes, and try to understand the feelings behind the message.)

D. Probe for more information and obtain facts

(NOTE: Repeat certain words that the other person has said. Do not jump to conclusions before determining the facts.)

EXAMPLE: Patient — The food is terrible. It is always cold.
Employee — Is your food cold at every meal?

E. Weigh alternatives

(NOTE: If employees have opportunities to participate in arriving at solutions to problems, they are more likely to be enthusiastic about helping implement the solution.)

INFORMATION SHEET

F. Help the other person develop solutions

(NOTE: It is preferable to assist those being interviewed in working out their own solutions; however, make certain that solutions are consistent with the needs of the department and/or facility.)

X. Retention percentages of ways people learn (Transparency #4)

A. Reading — We remember approximately 10 percent of what we read

B. Hearing — We remember approximately 20 percent of what we hear

C. Seeing — We remember approximately 30 percent of what we see

D. Hearing and seeing — We remember approximately 50 percent of what we see and hear

E. Saying — We remember approximately 70 percent of what we say

F. Saying and doing — We remember approximately 90 percent of what we say and do

(NOTE: Although these percentages are only approximations, they do indicate where the emphasis should be put in nutritional counseling and on-the-job training.)

XI. Types of media

A. Visual material

EXAMPLES: Slides, filmstrips, transparencies, food models

(NOTE: Filmstrips are the most popular form of instructional material.)

B. Audio material

EXAMPLE: Tape recordings

(NOTE: Audio material is adaptable to either individualized instruction or large-group instruction, such as inservice.)

C. Audiovisual material

EXAMPLES: Films, television, videotapes

(NOTE: Audiovisual material combines seeing and hearing. The learner can control such material by starting or stopping the machine, or by repeating the material at any time.)

INFORMATION SHEET

D. Printed material

EXAMPLES: Posters, manuals, food exchange booklets, diet sheets

(NOTE: Printed material can be used any time and anywhere. Such material allows the learner to progress at his or her own rate.)

XII. Uses of media in communication

A. Providing diversity and variety in learning experiences

B. Clarifying and simplifying complex concepts

C. Directing learner's attention to important points

D. Explaining details

E. Raising questions

XIII. Communication skills needed in nutritional counseling (Transparency #6; Clinical Assignment Sheet #6)

A. Developing rapport with patients

(NOTE: Be friendly, smile, and reassure patient that you are there to help.)

B. Interviewing

EXAMPLE: Obtaining diet history and/or food preferences

(NOTE: Interviewing requires constant interaction between the patient and counselor.)

C. Listening

EXAMPLE: Active listening

(NOTE: Be aware of patient's attitudes and allow patient to talk.)

D. Teaching

EXAMPLES: Discussions, handouts, food models, sample menus

(NOTE: Anticipate questions and plan suitable teaching aids.)

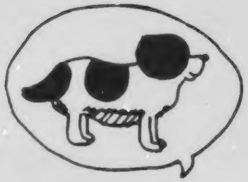
E. Tailoring diet instruction to patient

EXAMPLES: Determining patient's needs, interests, concerns, life-style

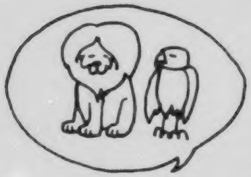
F. Complimenting patient on any progress achieved

EXAMPLE: "That is an important point. I'm glad you brought that up."

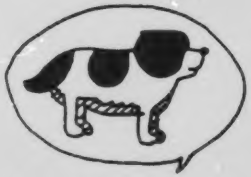
Communicating



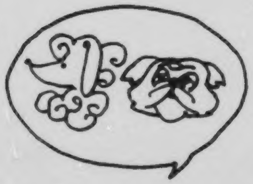
"I have a pet at home"



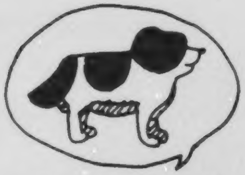
"Oh, what kind of a pet?"



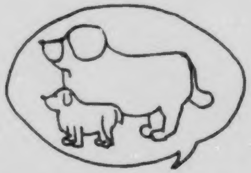
"It is a dog"



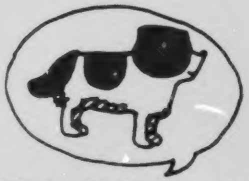
"What kind of a dog?"



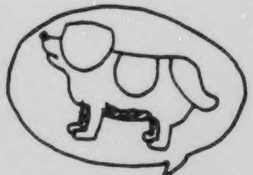
"It is a St. Bernard"



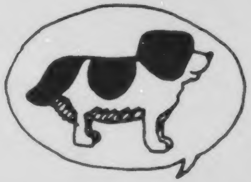
"Grown up or a puppy?"



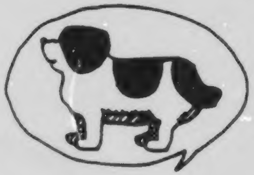
"It is full-grown"



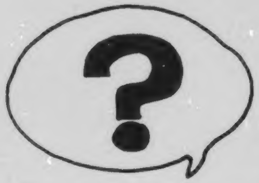
"What color is it?"



"It is brown and white"



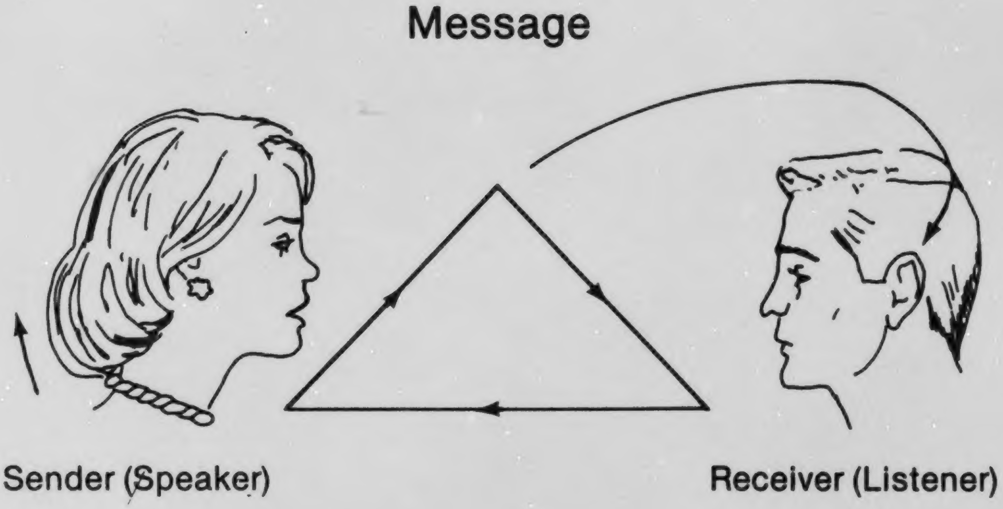
"Why didn't you say you had a full-grown brown and white St. Bernard as a pet in the first place?"



"Why doesn't anybody understand me?"

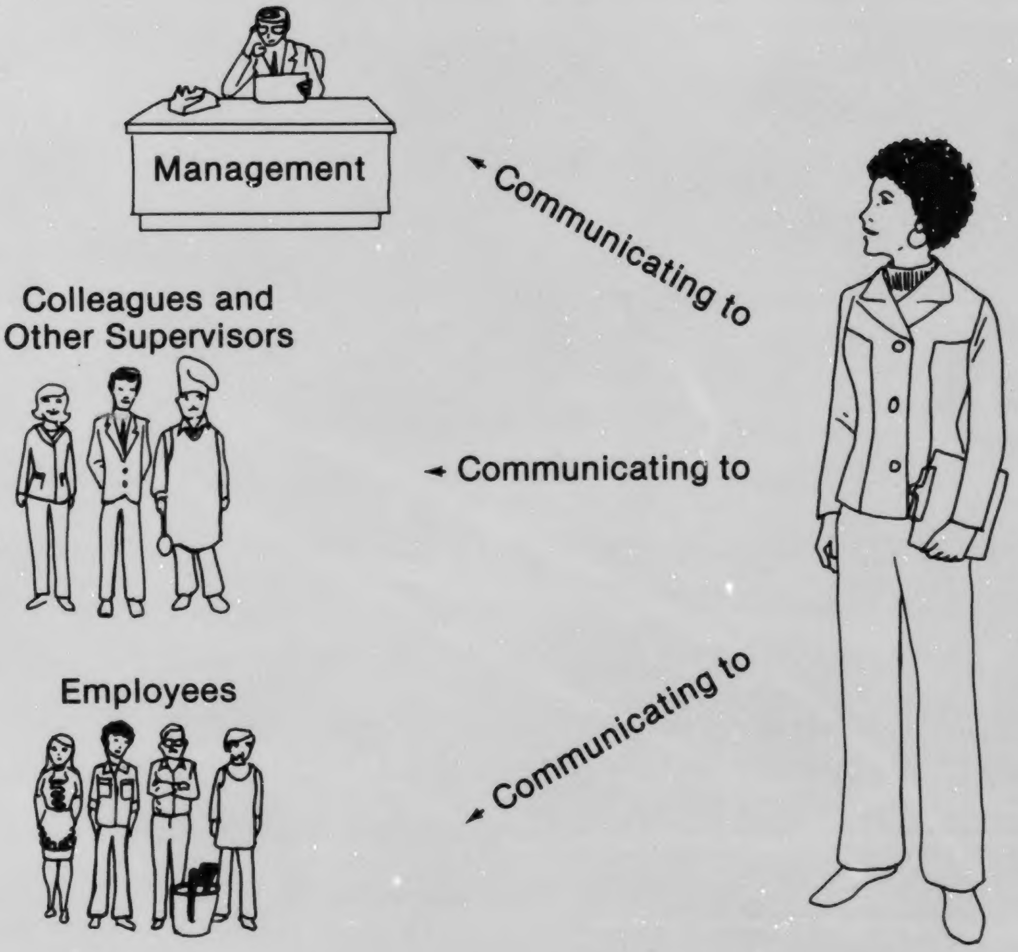
DO NOT ASSUME EVERYONE UNDERSTANDS COMMON WORDS

Simple Communication


Message
Sender (Speaker)
Receiver (Listener)

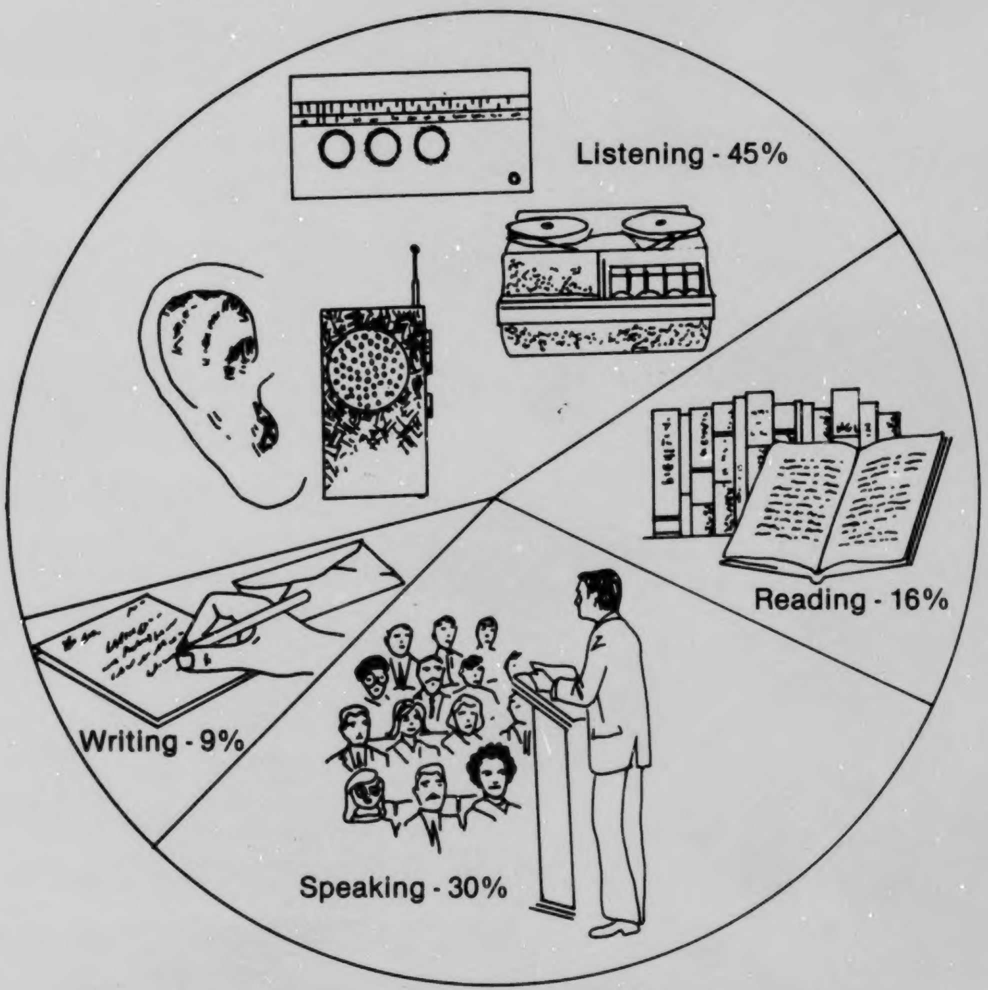
Jack Halloran, *Applied Human Relations: An Organizational Approach,* 2nd ed., © 1983, p. 33. Reproduced by permission of Prentice-Hall, Inc., Englewood Cliffs, New Jersey.

Communication Routes


Management
Communicating to
Colleagues and Other Supervisors
Communicating to
Employees
Communicating to

Used with permission of McGraw-Hill Book Company.

Daily Communication



How We Spend One Day Communicating

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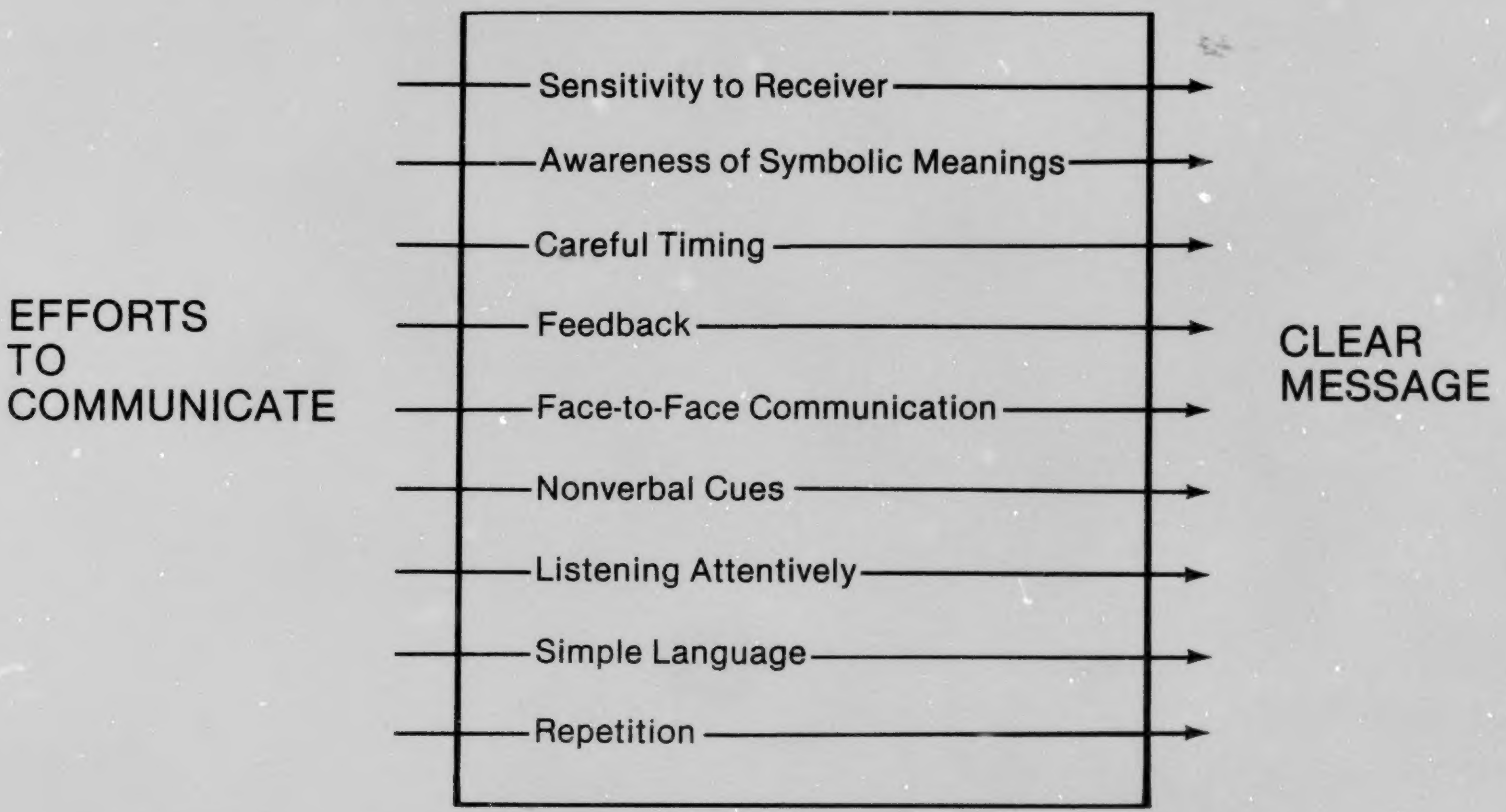
Techniques for Improved Communication



EFFORTS
TO
COMMUNICATE

- Sensitivity to Receiver
- Awareness of Symbolic Meanings
- Careful Timing
- Feedback
- Face-to-Face Communication
- Nonverbal Cues
- Listening Attentively
- Simple Language
- Repetition

CLEAR
MESSAGE

George Strauss, Leonard R. Sayles. *Personnel: The Human Problems of Management*, 4th ed., ©1980, p. 179. Adapted by permission of Prentice-Hall, Inc., Englewood Cliffs, New Jersey.

I HEAR AND I FORGET
I SEE AND I REMEMBER
I DO AND I UNDERSTAND

confucius

TM #6

FSS - 525-B

COMMUNICATION SKILLS
UNIT X

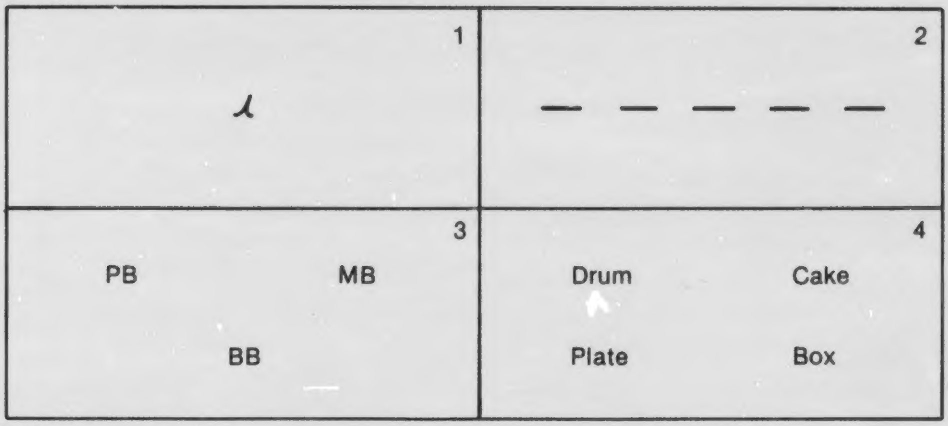
CLASS ASSIGNMENT SHEET #1 — PRACTICE LISTENING SKILLS

NAME ______________________________ SCORE ____________

Listening is probably the most important communication skill, yet most of us do it very badly. Active listening requires concentration and mental participation.

PART I

Use the following diagram to practice active listening. As the instructor reads the directions orally, respond accordingly on the diagram. Notice that the boxes are numbered.



PART II

After discussing the answers as a class, reply to the following questions. Write your answers in the spaces provided.

A. Why did you respond incorrectly? ______________________________

B. What lesson does your response teach you about becoming a better communicator?

____

C. Does your response prove that directions may be ambiguous and need greater clarity?

_____ How? ______________________________

D. How would you have done better if you had asked for clarification of any unclear portion of the message?

____

COMMUNICATION SKILLS
UNIT X

CLASS ASSIGNMENT SHEET #2 — MAKE RECOMMENDATIONS TO IMPROVE COMMUNICATION

NAME ______________________________ SCORE ______________

Written communication and the spoken word can be misinterpreted and misunderstood by the receiver. Communication is a two-way process involving

What you mean to say
What you actually say
What the other person thinks he or she hears
What the other person hears
What the other person says
What you think the other person says

Visual aids can enhance communication. The use of visuals strongly increases common understanding. Illustrate the importance of visual aids or mental imagery in communication by completing this assignment sheet.

PART I

The instructor will read aloud the following description taken from an encyclopedia. In the space provided, sketch or draw the kind of picture these printed words give you.

> The body is stout, with arched back; the limbs are short and stout, armed with strong, blunt claws; the ears are long; the tail is thick at the base and tapers gradually. The elongated head is set on a short, thick neck, and at the extremity of the snout is a disc in which the nostrils open. The mouth is small and tubular, furnished with a long extensible tongue. The individual is large, measuring 6 feet 8 inches. In color it is pale sandy or yellow; the hair is scanty and skin shows through.

CLASS ASSIGNMENT SHEET #2

PART II

Answer the following questions.

A. Do you use mental pictures and/or actual pictures to enhance your communication skills?__________ Why or why not?__________

B. What are some problems with written communication?__________

C. What are some problems with spoken communication?__________

D. Write one incident you recall in which the communication has been misinterpreted and/or misunderstood.

E. How could this incident have been avoided?

Comments: __________

COMMUNICATION SKILLS
UNIT X

CLASS ASSIGNMENT SHEET #3 — USE APPROPRIATE TECHNIQUES FOR HANDLING COMPLAINTS AND/OR GRIEVANCES

NAME ______________________________ SCORE ____________

Handling complaints and/or grievances takes patience and concern for others. Food service supervisors must learn to be very diplomatic in their relationships with other people. Using the techniques discussed in Sections IV and VII of the Information Sheet, describe how you would handle the following situations. Discuss as a class.

CASE STUDY I — PATIENT RELATIONS

Mrs. A is on a low-salt, diabetic diet. She is complaining that the hospital food is tasteless. She is having her family bring her supper from home. Describe techniques you would use in handling her complaint.

____

____

____

____

____

CASE STUDY II — EMPLOYEE RELATIONS

An increase in raw-food cost has necessitated an increase in the cost of employee meals. Several of the employees are standing at the kitchen door demanding an explanation. Describe techniques you would use in handling their grievance.

____

____

____

____

____

Comments: ______________________________

____

____

COMMUNICATION SKILLS
UNIT X

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

PART I

A. Box 1: Although most students will place the dot in the usual place *above* the "i," they should have placed it *on* the "i."

B. Box 2: Many students will write the letters on the lines; however, the directions told them to write the letters in the blank spaces. The correct answer is _X_E_R_O_X.

C. Box 3: There is, of course, no such thing as a mama bull.

D. Box 4: Students may circle "drum," "cake," or "plate" (all belong because they have similar shapes); however, many students will incorrectly circle "box," the word (and shape) that does *not* belong.

PART II — Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #2

PART I

After students have completed their pictures, announce that the animal is the aardvark. Ask the group to reread the description to see how neatly the words are now reinforced with the mental picture in one's mind.

PART II — Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #3 — Evaluated to the satisfaction of the class instructor

COMMUNICATION SKILLS
UNIT X

CLINICAL ASSIGNMENT SHEET #1 — MAKE RECOMMENDATIONS TO IMPROVE LISTENING SKILLS

NAME ____ SCORE ________________

Active listening requires a caring person, one who is interested in the speaker and the intended message.

Read the following characteristics of listening and of not listening; then identify your listening habits by recording specific incidents that occur throughout your work week.

LISTENING

YOU ARE NOT LISTENING TO ME WHEN . . .

You do not care about me

You say you understand before you know me well enough

You have an answer to my problem before I've finished telling you what my problem is

You cut me off before I have finished speaking

You are dying to tell me something

You feel critical of my vocabulary, grammar, or accent

You tell me about your experience, making mine seem unimportant

You are communicating to someone else in the room

You refuse my thanks by saying you have not really done anything

YOU ARE LISTENING TO ME WHEN . . .

You come quietly into my private world and let me be me

You really try to understand me even when I am not making much sense

You grasp my point of view even when it is against your own sincere convictions

You realize that the hour I took from you has left you a bit tired and drained

You allow me the dignity of making my own decisions even though you think they might be wrong

You do not take my problem from me, but allow me to deal with it in my own way

CLINICAL ASSIGNMENT SHEET #1

You hold back your desire to give me good advice

You do not offer me religious solace when you sense I am not ready for it

You give me enough room to discover for myself what is really going on

You accept my gift of gratitude by telling me how good it makes you feel to know you have been helpful

(Author unknown)

Record incidents at work that illustrate your listening habits.

A. I was not listening when . . .

B. I was listening when . . .

CLINICAL ASSIGNMENT SHEET #1

C. Based on what you have recorded, what recommendations can you make to improve your listening skills?

____

____

____

____

COMMUNICATION SKILLS
UNIT X

CLINICAL ASSIGNMENT SHEET #2 — CONDUCT IN-SERVICE CLASS ON COMMUNICATION SKILLS

NAME ______________________________ SCORE ______________

This assignment sheet illustrates the importance of good communication in preventing misunderstanding. It also demonstrates some of the barriers to communication.

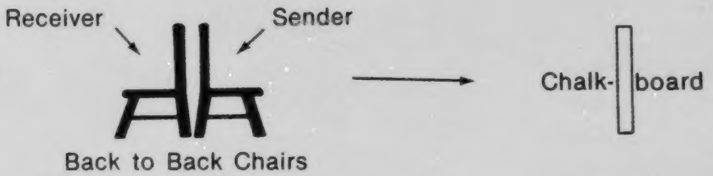
Conduct an in-service class on communication skills, using the following exercise.

A. Gather and set up the following equipment

1. Chairs for everyone participating

   (NOTE: The chairs will be set up in pairs, back to back, with one chair facing a chalkboard. If possible, set chairs far enough apart so that the participants cannot observe one another.)

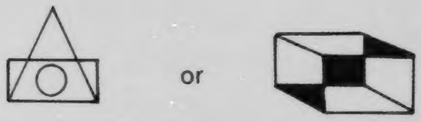
   EXAMPLE:



2. Chalkboard

3. Geometric drawing on chalkboard

   EXAMPLE:



   (NOTE: Until the participants are divided into couples, cover drawing so that no one can see it. Only one person in each couple may see this drawing.)

4. Paper and pencil for each couple

5. Tape recorder to record your voice while teaching the class for use in completing Clinical Assignment Sheet #3.

CLINICAL ASSIGNMENT SHEET #2

B. After you have correctly arranged the chairs in the meeting room, have each participant choose a partner. One is to be the sender of the message; one is to be the receiver. The sender will sit in the chair facing the chalkboard, with the receiver sitting behind, facing the opposite direction. The receiver may not talk or ask questions.

C. When everyone is in position, unveil the drawing and instruct the senders to tell their receivers how to draw the same illustration on their pieces of paper.

D. After the receivers have completed their illustrations, stimulate discussion by asking participants the following questions.

   1. What problems did the senders encounter?

   2. What problems did the receivers encounter?

   3. Would it help if you could have asked questions or have had some feedback? How?

E. If time permits, reverse roles; sender will now be receiver and vice versa; change drawings, and repeat process *allowing receiver to ask questions.*

F. After the new receiver/senders have completed their instructions and illustrations, ask for discussion on whether or not communication was improved by feedback.

FSS - 541-B

COMMUNICATION SKILLS
UNIT X

CLINICAL ASSIGNMENT SHEET #3 — ANALYZE VOICE QUALITIES

NAME ______________________________ SCORE ____________

Because 35 percent of our communication is verbal, it is important to know how we sound to others.

Analyze your voice qualities by listening to the tape recording of the inservice you conducted in Clinical Assignment Sheet #2. Complete the rating scale below by placing a check (✓) in the appropriate column. Have your dietitian rate your voice, too. Check back periodically to see if there has been any noticeable progress.

VOICE RATING	**Yes**	**No**	**Maybe/ Sometimes**
Do you speak too loudly?			
Do people frequently ask you to repeat?			
Do you speak in the same tone continually?			
Do you speak in an artificial, unnatural, or affected voice?			
Is your voice high-pitched and shrill?			
Do you speak in long sentences that frequently lose their meaning?			
Do you speak in mushy tones as though you had something in your mouth?			
Do you use "uh," "OK," or "you know?" frequently?			
Do you talk "through your nose"?			
Do you talk in a whining and apologetic manner?			
Do you often speak too fast or in a slow drawl?			
Do you mispronounce words frequently?			
Does your voice lose its force and expression at the ends of sentences?			
Do you run words together?			
Do you have an adequate vocabulary?			
Can you be heard clearly by all those in the room?			
Is your voice friendly?			

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COMMUNICATION SKILLS
UNIT X

CLINICAL ASSIGNMENT SHEET #4 — EVALUATE USE OF NONVERBAL COMMUNICATION SKILLS

NAME ______________________________ SCORE ______________

An estimated 65 percent of the content of a message is communicated nonverbally. To fully understand someone's meaning requires paying as much attention to the person speaking as to the words being spoken. Voice tones, facial gestures, and body language communicate more than the words do. Effective communicators are people oriented, not word oriented.

PART I

Observe nonverbal communication in the dietary department of your facility. List nonverbal communication skills you observe.

EXAMPLE: Touching a person's arm or shoulder when speaking

____

____

____

____

____

____

____

____

PART II

A. Did the nonverbal techniques you observed improve communication? ______________

If so, why? ____

If not, why? ____

B. What nonverbal techniques do you use frequently in communicating with employees?

____

____

With patients? ____

CLINICAL ASSIGNMENT SHEET #4

C. How can you use nonverbal techniques to improve your communication skills?

Comments:

COMMUNICATION SKILLS
UNIT X

CLINICAL ASSIGNMENT SHEET #5 — OBTAIN DIET HISTORIES

NAME ____ SCORE ________________

An adequate diet history tells the dietitian, dietetic technician, and/or dietetic assistant about the patient's food habits. It provides the basis for all counseling that follows. The information obtained from the patient enables the dietitian to individualize the diet, which encourages better compliance to the modification prescribed by the physician.

Using the communication skills you have learned in this unit, obtain a diet history from two patients in your health care facility. One of the patients must be an individual with diabetes. Your dietitian will help you complete the *summary of intake* section. Write the information on the following form, in the blanks provided.

(NOTE: The diet history form can be changed to meet the needs of your health care facility.)

CLINICAL ASSIGNMENT SHEET #5

DIET HISTORY

Room number ______________ Patient's name ________________________________

Physician ____________________________ Diagnosis ____________________________

Patient's admission number ________________________________ Age _________ Sex ______

Height ___________ Weight ___________ Recent change in weight? ________________

Diet prescription ____________________________ Previous diet prescription? ___________

How long on diet? ____

Activity level? ___________________________ Appetite? ___________________________

Number of feedings daily? ____

Who prepares food? __________________ Where are meals eaten? ________________

EXAMPLES: Home, away from home, cafe

ONE DAY'S TYPICAL FOOD INTAKE

Beside each food item listed, check (✓) the appropriate column. If you normally include that item in your diet, check the "yes" column. If you usually omit that item, check the "no" column. For every item checked "yes," write your food preferences. Please record the amount you eat and how the food is prepared.

EXAMPLE:

Food Item	Yes	No	Food Preference	Amount Eaten	Preparation Method
Fruit/juice	✓		Orange juice	1/2 cup	Canned

MORNING MEAL

Food Item	Yes	No	Food Preference	Amount Eaten	Preparation Method
Fruit/juice					
Egg/meat					
Cereal					
Bread					
Fat					
Beverage(s)					

CLINICAL ASSIGNMENT SHEET #5

MORNING MEAL (cont.)

Food Item	Yes	No	Food Preference	Amount Eaten	Preparation Method
Sugar					
Other foods (Please list.)					

NOON MEAL

Food Item	Yes	No	Food Preference	Amount Eaten	Preparation Method
Soup					
Sandwich					
Meat or alternate					
Starchy food					
Vegetables					
Salad					
Fruit					
Bread					
Fat					
Dessert					
Beverage(s)					
Other foods (Please list.)					

CLINICAL ASSIGNMENT SHEET #5

EVENING MEAL

Food Item	Yes	No	Food Preference	Amount Eaten	Preparation Method
Soup					
Sandwich					
Meat or alternate					
Starchy foods					
Vegetables					
Salad					
Fruit					
Bread					
Fat					
Dessert					
Beverage(s)					
Other foods (Please list.)					

BETWEEN MEALS

Food Item	Time Eaten	Amount Eaten	Preparation Method
(Please list.)			

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CLINICAL ASSIGNMENT SHEET #5

Food allergies?

Food intolerances?

SPECIAL FEEDING PROBLEMS

Yes	No	
		Feeds self
		Difficulty chewing (ill-fitting dentures, no teeth)
		Difficulty swallowing (CVA)
		Difficulty handling food
		Nausea and/or vomiting
		Vitamin/mineral supplement

What type?

How often?

Date of diet history

Signature/title

SUMMARY OF INTAKE (completed by R.D.)			
Food Group	**Servings**	**Adequate**	**Inadequate**
Milk			
Meat			
Bread			
Fruit			
Vegetable			

Signature/title

CLINICAL ASSIGNMENT SHEET #5

DIET HISTORY

Room number ______________ Patient's name ______________________________

Physician ______________________ Diagnosis ______________________________

Patient's admission number ______________________________ Age ________ Sex ______

Height __________ Weight __________ Recent change in weight? ______________

Diet prescription ______________________ Previous diet prescription? __________

How long on diet? ____

Activity level? ____________________ Appetite? ______________________

Number of feedings daily? ______________________________________

Who prepares food? ______________ Where are meals eaten? ______________

EXAMPLES: Home, away from home, cafe

ONE DAY'S TYPICAL FOOD INTAKE

Beside each food item listed, check (✓) the appropriate column. If you normally include that item in your diet, check the "yes" column. If you usually omit that item, check the "no" column. For every item checked "yes," write your food preferences. Please record the amount you eat and how the food is prepared.

EXAMPLE:

Food Item	Yes	No	Food Preference	Amount Eaten	Preparation Method
Fruit/juice	✓		Orange juice	½ cup	Canned

MORNING MEAL

Food Item	Yes	No	Food Preference	Amount Eaten	Preparation Method
Fruit/juice					
Egg/meat					
Cereal					
Bread					
Fat					
Beverage(s)					

CLINICAL ASSIGNMENT SHEET #5

MORNING MEAL (cont.)

Food Item	Yes	No	Food Preference	Amount Eaten	Preparation Method
Sugar					
Other foods (Please list.)					

NOON MEAL

Food Item	Yes	No	Food Preference	Amount Eaten	Preparation Method
Soup					
Sandwich					
Meat or alternate					
Starchy food					
Vegetables					
Salad					
Fruit					
Bread					
Fat					
Dessert					
Beverage(s)					
Other foods (Please list.)					

CLINICAL ASSIGNMENT SHEET #5

EVENING MEAL

Food Item	Yes	No	Food Preference	Amount Eaten	Preparation Method
Soup					
Sandwich					
Meat or alternate					
Starchy foods					
Vegetables					
Salad					
Fruit					
Bread					
Fat					
Dessert					
Beverage(s)					
Other foods (Please list.)					

BETWEEN MEALS

Food Item	Time Eaten	Amount Eaten	Preparation Method
(Please list.)			

CLINICAL ASSIGNMENT SHEET #5

Food allergies?______________________________

Food intolerances?______________________________

SPECIAL FEEDING PROBLEMS

Yes	No	
____	____	Feeds self
____	____	Difficulty chewing (ill-fitting dentures, no teeth)
____	____	Difficulty swallowing (CVA)
____	____	Difficulty handling food
____	____	Nausea and/or vomiting
____	____	Vitamin/mineral supplement

What type?______________________________

How often?______________________________

Date of diet history______________________________

Signature/title______________________________

SUMMARY OF INTAKE (completed by R.D.)

Food Group	**Servings**	**Adequate**	**Inadequate**
Milk			
Meat			
Bread			
Fruit			
Vegetable			

Signature/title______________________________

COMMUNICATION SKILLS
UNIT X

CLINICAL ASSIGNMENT SHEET #6 — DEMONSTRATE NUTRITIONAL COUNSELING SKILLS

NAME ______________________________ SCORE ______________

The main objective of this unit is to use effective communication skills to develop good rapport with people. Good communication skills are extremely important when instructing patients on prescribed diets.

(NOTE: This assignment sheet is to be completed by both the student and the instructor. Parts I and II will be completed by the student. Part III will be completed by the instructor, who will then discuss with the student ways to improve the communication skills demonstrated.)

PART I

Observe the dietitian giving a diet instruction.

PART II

Give two routine diet instructions with the dietitian observing.

(NOTE: One diet instruction must be for a patient with diabetes.)

CLINICAL ASSIGNMENT SHEET #6

PART III — (to be completed by dietitian)

Patient ONE

EVALUATION CHECKLIST

	Yes	No	Comments
Preparation before diet instruction Checked medical record to confirm physician's written diet order			
Checked with nurse or family member about patient's mental attitude and physical condition			
Development of rapport with patient Approached patient in a friendly manner			
Properly introduced self (gave name and position)			
Emphasized the helpful nature of diet instruction			
Communicated on eye level with patient			
Maintained eye-to-eye contact with patient			
Introduction to counseling session Explained that the diet was prescribed by the physician			
Explained the purpose of the diet instruction			
Asked whether patient had had any previous counseling on this diet or on any modified diet; asked the name of any other modified diet patient had followed			
Found out how much patient knew about the diet			
Counseling methods and techniques Used food models or menus during the diet instruction			
Determined whether there was a significant other available for instruction; determined whether patient and/or significant other understood the diet instruction			

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CLINICAL ASSIGNMENT SHEET #6

Patient ONE (continued)

	Yes	No	Comments
Determined whether dietitian individualized the diet for the patient			
Prepared a sample menu with the patient			
Asked frequent questions to determine the patient's knowledge of restrictions			
Discouraged irrelevant conversation			
Gave the patient the opportunity to ask questions			
Gave accurate information and said, "I do not know, but I will find out for you" when necessary			
Made positive statements about the diet and stayed within the restrictions			
Summarized and emphasized major points			
Patient acceptance of diet modification Observed whether patient and/or family showed a willingness to accept the diet			
Evaluated whether patient was motivated to stay within the restrictions			
Determined whether the patient was satisfied with the kinds and amounts of foods in the meal plan			
Asked the patient how much of the diet he or she would be able to follow			
Follow-up Encouraged patient to get in touch if further information about the diet should be needed later			
Determined whether patient needed to be referred to another agency for help EXAMPLES: Food stamps, WIC, Meals on Wheels			
Provided reinforcement of diet at appropriate opportunities EXAMPLE: While making rounds at mealtime			
Sincerely supported and encouraged the patient on the diet			

CLINICAL ASSIGNMENT SHEET #6

EVALUATION CHECKLIST

Patient TWO

	Yes	No	Comments
Preparation before diet instruction Checked medical record to confirm physician's written diet order			
Checked with nurse or family member about patient's mental attitude and physical condition			
Development of rapport with patient Approached patient in a friendly manner			
Properly introduced self (gave name and position)			
Emphasized the helpful nature of diet instruction			
Communicated on eye level with patient			
Maintained eye-to-eye contact with patient			
Introduction to counseling session Explained that the diet was prescribed by the physician			
Explained the purpose of the diet instruction			
Asked whether patient had had any previous counseling on this diet or on any modified diet; asked the name of any other modified diet patient had followed			
Found out how much the patient knows about the diet			
Counseling methods and techniques Used food models or menus during the diet instruction			
Determined whether there was a significant other available for instruction; determined whether patient and/or significant other understood the diet instruction			
Determined whether dietitian individualized the diet for the patient			

CLINICAL ASSIGNMENT SHEET #6

Patient TWO (continued)

	Yes	No	Comments
Prepared a sample menu with the patient			
Asked frequent questions to determine the patient's knowledge of restrictions			
Discouraged irrelevant conversation			
Gave the patient the opportunity to ask questions			
Gave accurate information and said, "I do not know, but I will find out for you" when necessary			
Made positive statements about the diet and stayed within the restrictions			
Summarized and emphasized major points			
Patient acceptance of diet modification Observed whether patient and/or family showed a willingness to accept the diet			
Evaluated whether patient was motivated to stay within the restrictions			
Determined whether the patient was satisfied with the kinds and amounts of foods in the meal plan			
Asked the patient how much of the diet he or she would be able to follow			
Follow-up Encouraged patient to get in touch if further information about the diet should be needed later			
Determined whether patient needed to be referred to another agency for help EXAMPLES: Food stamps, WIC, Meals on Wheels			
Provided reinforcement of diet at appropriate opportunities EXAMPLE: While making rounds at mealtime			
Sincerely supported and encouraged the patient on the diet			

COMMUNICATION SKILLS
UNIT X

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #4 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #5 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #6 — Evaluated to the satisfaction of the clinical instructor

COMMUNICATION SKILLS
UNIT X

TEST

NAME ____ SCORE ________________

1. Match terms associated with communication skills to their correct definitions. Write the correct numbers in the blanks.

______a. Speaking about matters of right and wrong, often in a self-righteous way

______b. Information about nourishment an individual routinely takes; usually obtained by interview

______c. Questions that cannot be answered "yes" or "no"

______d. Ability to receive and respond to another's needs and/or experience

______e. Process whereby an individual is led to modify his or her diet according to a physician's prescription

______f. Critical evaluation

______g. Listener

______h. Ability to share another's emotions and/or feelings

______i. Circumstance that is grounds for complaint or resentment

______j. A face-to-face meeting of people to receive and/or gather information

______k. Instructional aids involving the use of the senses of sight and/or hearing

1. Critique
2. Diet history
3. Empathy
4. Grievance
5. Interview
6. Moralizing
7. Media
8. Nutritional counseling
9. Open-ended questions
10. Receiver
11. Sensitivity

2. Describe effective communication.

a. Consists of giving and receiving information

____

____

____

TEST

b. Follows routes or lines

____

____

____

c. Includes several factors

____

____

____

____

d. Consists of two types

____

____

3. Match paths of communication in a health care facility to specific examples of their uses. Write the correct numbers in the blanks.

______a. Policies, grievances

______b. Delivering trays, busing dishes in dining room

______c. Food production sheets, job descriptions, work schedules

______d. Diet orders, maintenance repair requests, requisitions from storeroom

______e. Telephone messages, conversation, requests for assistance

1. Between patients and employees
2. Among employees
3. Among departments
4. Between administration and employees
5. Between supervisors and employees

TEST

4. Select from the following list techniques for improved communication. Write an "X" in the blank before each correct answer.

______a. Avoid repetition

______b. Use feedback

______c. Be insensitive to receiver

______d. Observe nonverbal cues

______e. Use complex terms and/or language

______f. Be aware of symbolic meanings

______g. Speak as fast as possible

______h. Practice face-to-face communication

______i. Listen inattentively

______j. Time communications carefully

______k. Ask leading questions

5. Select from the following list barriers to effective communication. Write an "X" in the blank before each correct answer.

______a. Interpreting message in terms of our self-interests

______b. Choosing points that support existing beliefs and ignoring those that do not

______c. Hearing what we expect to hear

______d. Listening attentively

______e. Stating message clearly and specifically

______f. Interpreting message in terms of our background and experience

______g. Understanding the message exactly as intended

______h. Allowing moods to affect communication

______i. Misinterpreting message

TEST

6. State three ways of overcoming communication barriers.

a. ____________________

b. ____________________

c. ____________________

7. Select from the following list techniques for handling complaints. Write an "X" in the blank before each correct answer.

_____a. When a legitimate complaint is heard, correct the situation

_____b. Collect the facts that support your side

_____c. Argue to prove your point

_____d. Be fair and just

_____e. Never admit your mistakes

_____f. Allow others to express their point of view thoroughly

_____g. Draw your own conclusions without wasting time to get facts

_____h. Treat employee's complaints or grievances as a private matter

8. Discuss basic elements of a good interview.

a. Purpose — ____________________

b. Privacy — ____________________

c. Rapport — ____________________

d. Proper environment

1) ____________________

2) ____________________

9. Select from the following list techniques of interviewing. Write an "X" in the blank before each correct answer.

_____a. Listen for phone calls

_____b. Try to summarize the other person's ideas

TEST

______c. Weigh alternatives

______d. Discourage other person from talking or expressing feelings

______e. Probe for more information and obtain facts

______f. Listen while you are getting your bookwork done

______g. Listen with empathy

______h. Take detailed notes

______i. Help the other person develop solutions

10. Match retention percentages to ways people learn. Write the correct percentage in the blanks provided.

	Ways People Learn	Approximate Percent Remembered
______________________a.	Hearing	10 percent
______________________b.	Saying	20 percent
______________________c.	Reading	30 percent
______________________d.	Hearing and seeing	50 percent
______________________e.	Saying and doing	70 percent
______________________f.	Seeing	90 percent

11. Name three types of media.

a. ____

b. ____

c. ____

12. Select from the following list uses of media in communication. Write an "X" in the blank before each correct answer.

______a. Directing learner's attention to important points

______b. Raising questions

______c. Clarifying and simplifying complex concepts

TEST

______d. Entertaining learner

______e. Allowing learner to rest

______f. Providing diversity and variety in learning experiences

______g. Explaining details

13. Select from the following list communication skills needed in nutritional counseling. Write an "X" in the blank before each correct answer.

______a. Pointing out mistakes patient makes in meal plan

______b. Listening

______c. Interviewing

______d. Handing out the same printed diet sheet to each patient

______e. Developing rapport with patients

______f. Teaching

______g. Tailoring diet instruction to patient

______h. Pointing out how little the physician knows about diet

(NOTE: Test questions 14-20 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

14. Make recommendations to improve communication.

15. Use appropriate techniques for handling complaints and/or grievances.

16. Make recommendations to improve listening skills.

17. Conduct in-service class on communication skills.

18. Evaluate use of nonverbal communication skills.

19. Obtain diet histories.

20. Demonstrate nutritional counseling skills.

COMMUNICATION SKILLS
UNIT X

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The point system in parentheses is intended to be a guideline and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 599. The point total for questions 1-13 is 209; the point total for questions 14-20 is 390.)

1. (22 points)

a.	6	d.	11	g.	10	j.	5
b.	2	e.	8	h.	3	k.	7
c.	9	f.	1	i.	4		

2. (24 points)

Description should include the following

a. Consists of giving and receiving information

    1) Sender
    2) Message
    3) Receiver

b. Follows routes or lines

    1) To management
    2) To patients and/or colleagues
    3) To employees

c. Includes several factors

    1) Listening
    2) Speaking
    3) Reading
    4) Writing

ANSWERS TO TEST

d. Consists of two types

   1) Verbal
   2) Nonverbal

3. (10 points)

a.	4	d.	3
b.	1	e.	2
c.	5		

4. (20 points)

   b, d, f, h, j

5. (18 points)

   a, b, c, f, h, i

6. (18 points)

   Answer should include any three of the following

   a. Communicate honestly
   b. Use verbal and nonverbal feedback
   c. Keep your promises
   d. Use multiple channels of communication
   e. Appeal to human needs

7. (16 points)

   a, d, f, h

8. (10 points)

   Discussion should include the following

   a. Purpose — Goals should be clearly in mind of interviewer
   b. Privacy — There should be no feeling that one is being heard by others
   c. Rapport — Attempts should be made to establish harmonious and trusting relationships

ANSWERS TO TEST

d. Proper environment

   1) Location should be physically comfortable for both interviewer and person being interviewed

   2) Distractions should be minimal

9. (25 points)

   b, c, e, g, i

10. (12 points)

a.	20 percent	d.	50 percent
b.	70 percent	e.	90 percent
c.	10 percent	f.	30 percent

11. (3 points)

   Answer should include any three of the following

   a. Visual material

   b. Audio material

   c. Audiovisual material

   d. Printed material

12. (15 points)

   a, b, c, f, g

13. (16 points)

   b, c, e, f, g

14. Evaluated to the satisfaction of the class instructor (20 points)

15. Evaluated to the satisfaction of the class instructor (20 points)

ANSWERS TO TEST

16. Evaluated to the satisfaction of the clinical instructor (25 points)

17. Evaluated to the satisfaction of the clinical instructor (50 points)

18. Evaluated to the satisfaction of the clinical instructor (25 points)

19. Evaluated to the satisfaction of the clinical instructor (100 points)

20. Evaluated to the satisfaction of the clinical instructor (150 points)

DOCUMENTATION
UNIT XI

UNIT OBJECTIVE

After completing this unit, the student should be able to complete a nutritional screening checklist and chart information about nutritional care in the medical record. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with documentation to their correct definitions.
2. Select from a list components of nutritional care.
3. State characteristics of a medical record.
4. List important information to chart in a medical record.
5. Describe nutritional care information charted in medical record.
6. Distinguish between formats used in medical records.
7. Distinguish between qualities of good and poor charting.
8. Select from a list appropriate purposes of a quality assurance program.
9. Select from a list various duties of the food service supervisor concerning quality assurance.
10. Use basic formats for charting information in medical record.
11. Document information from case studies.
12. Record characteristics of a medical record.
13. Use nutritional screening checklist to identify problems.
14. Chart nutritional care information.

DOCUMENTATION
UNIT XI

SUGGESTED ACTIVITIES

I. Suggested activities

- A. Provide students with objective sheet.
- B. Provide students with information and assignment sheets.
- C. Discuss unit and specific objectives.
- D. Discuss information and assignment sheets.
- E. Develop appropriate learning activities for special needs students.
- F. Make a checklist of characteristics of good and poor nutrition from *Food Service Worker*, Unit I, "Basic Nutrition." Have students practice visual screening using this checklist on classmates and/or patients.
- G. Have students bring examples of good and poor charting from the medical records in their health care facilities. Caution them to remove identification from the examples. Medical records are confidential information.
- H. Have class discuss known consequences in medical records of poor handwriting, poor spelling, or use of abbreviations that are not well known.
- I. Bring an example of a therapeutic audit of a medical record for the dietary department. Discuss this with the class.

  EXAMPLE: Dietary audit of adult-onset diabetes
- J. Bring an example of an administrative audit for the dietary department. Discuss this with the class.

  EXAMPLE: Monitoring temperature of food when it reaches the patients.
- K. Have students role play a situation in which they interview a patient for nutritional screening.
- L. Give test.
- M. Reteach if necessary.

SUGGESTED ACTIVITIES

II. Instructional materials

   A. Objective sheet

   B. Suggested activities

   C. Information sheet

   D. Class assignment sheets

      1. Class Assignment Sheet #1 — Use Basic Formats for Charting Information in Medical Record

      2. Class Assignment Sheet #2 — Document Information from Case Studies

   E. Answers to class assignment sheets

   F. Clinical assignment sheets

      1. Clinical Assignment Sheet #1 — Record Characteristics of a Medical Record

      2. Clinical Assignment Sheet #2 — Use Nutritional Screening Checklist to Identify Problems

      3. Clinical Assignment Sheet #3 — Chart Nutritional Care Information

   G. Answers to clinical assignment sheets

   H. Test

   I. Answers to test

III. Unit references

   A. Grant, Anne. *Nutritional Assessment Guidelines.* Seattle, Washington: Anne Grant, 1979.

   B. *A Guide to Nutritional Care.* Evansville, Indiana: Mead Johnson, n.d.

   C. *Guidelines for Consultant Dietitians in Long-Term Care Facilities.* Chicago: American Dietetic Association, 1978.

   D. *Guidelines for Recording Nutritional Information in Medical Records.* Chicago: American Hospital Association, 1976.

   E. Mahaffey, Mary J., et al. *Food Service Manual for Health Care Institutions.* Chicago: American Hospital Association, 1981.

DOCUMENTATION
UNIT XI

INFORMATION SHEET

I. Terms and definitions

  A. Nutritional care — Application of the science and art of nutrition in helping people select and obtain food to nourish their bodies

  (NOTE: Nutritional care is important in maintenance of health and in prevention of disease throughout the life cycle.)

  B. Documentation — Collecting written information and recording it for future reference (Class Assignment Sheets #1 and #2)

  (NOTE: If information is not documented, it is not done.)

  C. Medical record (chart) — Permanent document that contains known facts about a patient

  (CAUTION: The patient's medical record is considered a legal document and should be treated as such.)

  D. Nutritional screening — Identifying patients at nutritional risk (Clinical Assignment Sheet #2)

  EXAMPLE: Used to discover deficiencies and/or excesses in nutrients in an individual's intake

  (NOTE: The dietetic assistant or dietetic technician screens to identify patients at risk. The dietitian nutritionally assesses patients at risk.)

  E. Quality assurance — Program designed to identify and correct problems so that patients will be provided the best possible care

  (NOTE: Quality assurance includes writing criteria for the best possible care, and then conducting systematic checks to measure compliance of meeting criteria.)

  F. Joint Commission on Accreditation of Hospitals (JCAH) — Private, nongovernmental agency that establishes standards for health care facilities and provides periodic surveys to evaluate compliance

  (NOTE: Facilities participate on a voluntary basis.)

  G. Deciliter (dl) — One tenth of a liter

II. Components of nutritional care

  A. Planning nutritionally adequate menus

INFORMATION SHEET

B. Preparing nutritionally adequate menus

(NOTE: Preparation involves presenting food in an appetizing manner so that it will be eaten. The meal *must be eaten* before the nutrients can benefit the individual.)

C. Obtaining diet history information

D. Screening individuals for nutritional needs (Clinical Assignment Sheet #2)

EXAMPLE: Checklist

E. Charting in medical records

III. Characteristics of a medical record (Clinical Assignment Sheet #1)

(NOTE: Each facility must identify in its policies and procedures who should be authorized to make entries in the medical records.)

A. Contains important information about patient

EXAMPLES: Medications, patient's progress, patient's response to therapy, instructions to patient or significant other, follow-up

(CAUTION: The information on a patient's medical record is confidential.)

B. Is used in determining quality of patient care

C. Provides communication among all members of health care team

(NOTE: The medical record contains pertinent information useful in quality care of patients)

D. Integrates care provided by each professional involved in treating a patient

(NOTE: The medical record provides a means of continuing care in different health care facilities.)

IV. Important information to chart in a medical record

(NOTE: The method for recording dietary data in the patients' medical records should be approved by each health care facility.)

EXAMPLE: Dietary data can be found in progress notes or nurses notes, if tagged for easy, quick reference.

A. Confirmation of diet order

(NOTE: JCAH recommends a notation that the prescribed diet is being given within twenty-four hours of admission. All diet changes are also noted in the chart.)

INFORMATION SHEET

B. Diet history

EXAMPLE: Past dietary pattern

C. Nutritional care

EXAMPLES: Report of patient's tolerance to diet, appetite, intake, comments on multiple restrictions, composition of tube feedings, any substitutions made

D. Discharge plan

(NOTE: A copy of the discharge diet should be placed in the medical record or kept on file in the dietary department.)

V. Nutritional care information charted in medical record (Clinical Assignment Sheet #3)

A. Reaction to prescribed diet

1. Acceptance or rejection of foods served
2. Appetite and intake

B. Attitude of patient

1. Cooperation or lack of cooperation
2. Interest or lack of interest in diet instructions

EXAMPLE: Needs encouragement at mealtime

C. Adequacy of patient's intake — Adequate or inadequate compared to Daily Food Guide

(NOTE: If intake is inadequate, indicate which food group[s] the patient's diet is lacking.)

D. Physical limitations that may affect intake

1. Ill-fitting dentures, no dentures, or no teeth
2. Difficulty chewing or swallowing

   (NOTE: These patients may need ground or chopped meat, thick liquids, moist foods.)

3. Paralysis
4. Blindness

INFORMATION SHEET

VI. Formats used in medical records (Class Assignment Sheet #1)

A. Source oriented (SOMR)

1. Information is charted according to source

EXAMPLES: Nurses notes, progress notes, lab reports

2. Each entry is written in brief paragraph form

(NOTE: Incomplete sentences and/or key phrases may be used.)

B. Problem oriented (POMR)

1. Information is charted according to patient problems

EXAMPLE: Each problem is listed and given a number: Obesity #4

2. Each progress note contains in a specific format information about one or more patient problems

EXAMPLES: **Subjective information** (S) — What the patient says

(NOTE: This information may include the patient's description of the situation or point of view.)

EXAMPLE: "I hate unseasoned food."

Objective information (O) — What the facts are

(NOTE: This information includes lab results, medications, and any other measurable signs.)

EXAMPLE: Patient weight, 240 lb

Assessment (A) — What the data means

(NOTE: Assessment should include your conclusions or your appraisal of the chance for success or failure based on patient's attitude.)

EXAMPLE: Ideal weight for height and sex is 140 lb.

Plan (P) — What should be done for patient

(NOTE: Plan includes recommendation[s] and follow-up.)

EXAMPLES: Adjust seasoning to improve flavor of food; instruct patient on use of exchange lists.

INFORMATION SHEET

VII. Qualities of good and poor charting (Class Assignment Sheet #2)

Good Charting	Poor Charting
Is clear, concise (NOTE: Be as brief as possible without sacrificing facts.)	Contains unnecessary words
Contains essential facts	Indicates bias against patient and/or family EXAMPLE: Patient is too dumb to learn diet.
Is easily understood	Contains jargon or slang EXAMPLE: Patient is too fat.
Clearly indicates personal opinion EXAMPLE: In my opinion, patient was not motivated to stay within diet restrictions.	Is critical of patient's treatment by other professionals EXAMPLE: The patient would tolerate the tube feeding if the nurses would administer it correctly.
Is signed with name, title of person writing it, and date EXAMPLE: Ann Jefferson, CDA 9-10-8__	Is not signed or dated

VIII. Appropriate purposes of a quality assurance program

A. Developing or realistically upgrading existing standards for patient service

B. Documenting existing positive performance

C. Identifying existing or potential departmental problems

D. Providing a systematic means for problem solving and continued follow-up

E. Satisfying regulatory agency requirements

EXAMPLE: Joint Commission on Accreditation of Hospitals

IX. Various duties of the food service supervisor concerning quality assurance

A. Monitoring food service for conformity with quality standards

INFORMATION SHEET

B. Obtaining diet history information for planning nutritional care

C. Guiding individuals in food selection, food preparation, and menu planning

(NOTE: Selection and planning are based on nutritional needs and diet prescription.)

D. Utilizing appropriate verbal and written communication

(NOTE: Good communication is necessary for dealing with patients, public, and other departments.)

E. Maintaining standards of sanitation, safety, and security

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DOCUMENTATION
UNIT XI

CLASS ASSIGNMENT SHEET #1 — USE BASIC FORMATS FOR CHARTING INFORMATION IN MEDICAL RECORD

NAME ______________________________ SCORE ____________

Two basic formats are used in recording information in the medical record. Your health care facility will prefer one method over the other, but it is important that you be able to use both.

Read the following case study, and then plan how and what information you will chart about the woman's nutritional care. Use both formats so that you will understand how they differ.

Case Study

A seventy-three-year-old woman is admitted to the hospital with a diagnosis of uncontrolled diabetes. She has been taking Orinase three times a day. Her blood sugar on admission was 400 milligrams per deciliter. Her height is 5 feet 4 inches, and her weight is 161 pounds. She lives alone and does very little food preparation. She does not drink milk. The prescribed diet is 1,200 calories.

PART I — Source-oriented format

Write information you would chart in this patient's medical record after your initial visit. Use the source-oriented method.

CLASS ASSIGNMENT SHEET #1

PART II - Problem-oriented format

Write information you would chart in this patient's medical record after your initial visit. Use the problem-oriented method.

Problem #1 — Uncontrolled diabetes

Problem #2 — Obesity

Subjective information — ____________________

____

Objective information — ____________________

____

Assessment — ____________________

____

Plan — ____________________

____

Comments: ____________________

____

____

DOCUMENTATION
UNIT XI

CLASS ASSIGNMENT SHEET #2 — DOCUMENT INFORMATION FROM CASE STUDIES

NAME ______________________________ SCORE ______________

The documentation process requires that you have the ability to see the important facts and to be able to record them so that they are easily understood. This process becomes easier with practice.

Organize the information in the following case studies into an acceptable form to put in a medical record. You may use either source-oriented format or problem-oriented format. Write your answers in the blanks provided.

Case Study A

Mrs. B is an eighty-four-year-old white female. She is 5 feet 3 inches tall and weighs 94 pounds. Her diagnosis is arteriosclerosis and senility. She has been on a clear liquid diet for five days. What information about her nutritional care do you need to document in her medical record?

____

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CLASS ASSIGNMENT SHEET #2

Case Study B

Mr. G is on a 2,000-calorie tube feeding. He is 5 feet 8 inches tall and weighs 149 pounds. His diagnosis is cerebrovascular accident (CVA). You notice as you pick up the container of tube feeding each day that approximately one-half of the feeding is left in the jar. You have been aware of this happening for the past three days. What information about his nutritional care do you need to document in his medical record?

Comments:

DOCUMENTATION
UNIT XI

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

PART I — Source-oriented format

EXAMPLE: Ht 5′4″, wt 161 lb, ideal weight range 113-126 lb; diet order 1,200 calories; takes Orinase 3 × day; does not drink milk; lives alone; does very little food preparation. Diet history obtained. Diet individualized to include food preferences, 1,200 calories, and four feedings

Ann Jefferson, CDA, 9-19-8__

PART II — Problem-oriented format

Problem #1 — Uncontrolled diabetes

Problem #2 — Obesity

Subjective information — I live alone and don't cook much. I don't like milk.

Objective information — Ht 5′4″, weight 161 lb
Blood sugar on admission 400 mg/dl
Orinase 3 × day

Assessment — Ideal weight for ht, sex, and frame 113-126 lb
#1 — Control caloric intake to help lower blood sugar
#2 — Weight loss of 1 lb/week

Plan — #1 — Individualize diet to include food preferences
#2 — Instruct on use of exchange lists with emphasis on use of convenience foods in meal pattern

Class Assignment Sheet #2 — Evaluated to the satisfaction of the class instructor

DOCUMENTATION
UNIT XI

CLINICAL ASSIGNMENT SHEET #1 — RECORD CHARACTERISTICS OF A MEDICAL RECORD

NAME ______________________________ SCORE ______________

Documentation is an important part of nutritional care. To document efficiently, you need to know where to look for specific facts. Familiarize yourself with a medical record. With the help of your dietitian, examine one chart and record information to answer the following questions.

A. What format is used? ______________________________

B. How many members of the health care team have provided information in this medical record? __________ List them. ______________________________

____

____

____

C. Is there referral information either from another health care facility or to another health care facility? __________ Is there information about the patient's nutritional care on the referral form? ______________________________

D. Read the entries made by the dietitian, dietetic technician, or dietetic assistant. From the recorded information, would you say this patient is receiving quality nutritional care? ______________ How can care be improved? __________

____

____

(CAUTION: Remember, if it is not documented, it is not done.)

CLINICAL ASSIGNMENT SHEET #1

E. When you are charting, do you look at the information other professionals have included in the record? ____________________

(NOTE: You should always check the physician's diet order. Be certain that the prescribed diet you are preparing is the exact one the doctor ordered.)

1. Do you check medications? __________
2. How many medications is the patient receiving daily? __________
3. How many medications are taken at mealtime? __________
4. Are there any food/drug interactions? __________
5. How long has the patient been NPO or on clear liquids for tests? __________

(CAUTION: Remember that information in the medical record is confidential.)

Comments: ____________________

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DOCUMENTATION
UNIT XI

CLINICAL ASSIGNMENT SHEET #2 — USE NUTRITIONAL SCREENING CHECKLIST TO IDENTIFY PROBLEMS

NAME ______________________________ SCORE ______________

Each patient in a health care facility needs nutritional care. The job of the dietitian, dietetic technician, and the dietetic assistant is to identify nutritional problems and plan how to combat them. One way to identify these problem areas is by using a nutritional screening checklist.

Visit one patient in your facility, and complete the form on the following page. Complete the "plan of action" section with the assistance of your clinical instructor.

(NOTE: This checklist may be revised to meet the needs of your facility.)

592 B

CLINICAL ASSIGNMENT SHEET #2

NUTRITIONAL SCREENING

1. NAME: ____________________ SEX: ______ DATE OF BIRTH: ____________

TRANSFERRED FROM: ____________ ADMISSION WEIGHT: ______ HEIGHT: ____________

DIAGNOSIS: ____

____________________ DIET ORDER: ____________________

2. DIETARY INTAKE: Does the resident accept all major food groups?

Milk ________ Meat ________ Fruit ________ Veg. ________ Bread ________ Cereal ________

Appetite ____________ Any known food allergies ____________________

Usual Meal Pattern at Home

Breakfast	Dinner	Supper	Between Meals

3. PRIORITY 1 CHECKLIST: Check conditions present in resident on admission. If a check is marked in any of the following, the resident is at nutritional risk.

______Severely underweight
______Recent unplanned weight loss
______Recent surgery
______Trauma, e.g., bone fracture
______Insulin dependent diabetes
______Gastrointestinal disorders
______Carcinoma
______Chemotherapy or radiation therapy
______Kidney disease/dialysis
______Decubiti (specify location)____________
______Sepsis

PRIORITY 2 CHECKLIST: Nutritional risk increases directly with the increase in number of conditions checked.

______History of alcoholism/drug abuse
______Severe overweight/obesity
______Liver disease
______Diabetes mellitus (non-insulin-depend.)
______Cardiovascular/circulatory disorders
______Orthopedic disorders
______Altered mental state
______Constipation or diarrhea
______Loss of appetite
______Nonspecific meal/food rejection
______Difficulty in chewing or swallowing________
______Inability to feed self
______Visual deficit
______Inability to communicate needs (hearing/speech)

4. GENERAL APPEARANCE: ____

5. MEDICATION (diet related): ____

____________________ Food Service Supervisor ____________ Date

PLAN OF ACTION

____

____

____

____________________ Dietitian ____________ Date

DOCUMENTATION
UNIT XI

CLINICAL ASSIGNMENT SHEET #3 — CHART
NUTRITIONAL CARE INFORMATION

NAME ______________________ SCORE __________

Charting can be simplified if you remember the basic information about nutritional care that needs to be recorded for each individual.

Choose one medical record, and visit that patient. Using the following outline, plan the information you will document in the chart. Have the dietitian approve your comments before making them a permanent record in the chart.

(CAUTION: Before beginning this assignment, be sure that you have obtained approval to record in the medical records in your facility.)

A. Prescribed diet order — ______________________

____

B. Reaction to prescribed diet

1. Acceptance of prescribed diet — ______________________
2. Appetite and intake — ______________________

C. Attitude of patient

1. Cooperation — ______________________
2. Interest — ______________________

D. Adequacy of patient's intake compared to Daily Food Guide — __________

If inadequate, which food group(s) is lacking? ______________

E. Physical limitations that may affect intake — ______________

____

F. Other important information that will aid in treatment of patient — __________

____

Comments: ______________________

____

____

____

____

DOCUMENTATION
UNIT XI

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

DOCUMENTATION
UNIT XI

TEST

NAME ____ SCORE ________________

1. Match terms associated with documentation to their correct definitions. Write the correct numbers in the blanks.

______a. Identifying patients at nutritional risk

______b. Private, nongovernmental agency that establishes standards for health care facilities and provides periodic surveys to evaluate compliance

______c. Collecting written information and recording it for future reference

______d. Permanent document that contains known facts about a patient

______e. Program designed to identify and correct problems so that patients will be provided the best possible care

______f. Application of the science and art of nutrition in helping people select and obtain food to nourish their bodies

______g. One tenth of a liter

1. Nutritional care
2. Documentation
3. Medical record (chart)
4. Nutritional screening
5. Quality assurance
6. Joint Commission on Accreditation of Hospitals (JCAH)
7. Deciliter (dl)

2. Select from the following list components of nutritional care. Write an "X" in the blank before each correct answer.

______a. Serving convenience foods

______b. Obtaining diet history information

______c. Making patients eat all food served

______d. Planning nutritionally adequate menus

______e. Screening individuals for nutritional needs

______f. Charting in medical records

______g. Criticizing poor food habits

______h. Preparing nutritionally adequate menus

TEST

3. State characteristics of a medical record.

   a. ______________________________

   b. ______________________________

   c. ______________________________

   d. ______________________________

4. List important information to chart in a medical record.

   a. ______________________________

   b. ______________________________

   c. ______________________________

   d. ______________________________

5. Describe nutritional care information charted in medical record.

   a. Reaction to prescribed diet — ______________________________

   ____

   ____

   b. Attitude of patient — ______________________________

   ____

   ____

   c. Adequacy of patient's intake — ______________________________

   ____

   d. Physical limitations that may affect intake — ______________________________

   ____

   ____

   ____

TEST

6. Distinguish between formats used in medical records. Write an "S" in the blank if the description is used in a source-oriented format. Write a "P" in the blank if the description is used in a problem-oriented format.

______a. Each progress note contains in a specific format information about one or more patient problems

______b. Information is charted according to source

______c. Each entry is written in brief paragraph form

______d. Information is charted according to patient problems

7. Distinguish between qualities of good and poor charting. Write a "G" in the blank if the quality listed is good. Write a "P" in the blank if the quality listed is poor.

______a. Is critical of patient's treatment by other professionals

______b. Contains unnecessary words

______c. Is signed with name, title of person writing it, and date

______d. Contains jargon or slang

______e. Contains essential facts

______f. Is clear, concise

______g. Clearly indicates personal opinion

______h. Is not signed or dated

______i. Indicates bias against patient and/or family

______j. Is easily understood

8. Select from the following list appropriate purposes of a quality assurance program. Write an "X" in the blank before each correct answer.

______a. Providing a systematic means for problem solving and continued follow-up

______b. Documenting existing negative performance

______c. Satisfying regulatory agency requirements

______d. Identifying existing or potential departmental problems

______e. Monitoring activities of other departments

______f. Developing or realistically upgrading existing standards for patient service

TEST

9. Select from the following list various duties of the food service supervisor concerning quality assurance. Write an "X" in the blank before each correct answer.

______a. Identifying employees who have poor work performance

______b. Maintaining standards of sanitation, safety, and security

______c. Obtaining diet history information for planning nutritional care

______d. Monitoring food service for conformity with inferior standards

______e. Utilizing appropriate verbal and written communication

______f. Guiding individuals in food selection, food preparation, and menu planning

(NOTE: Test questions 10-14 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

10. Use basic formats for charting information in medical record.

11. Document information from case studies.

12. Record characteristics of a medical record.

13. Use nutritional screening checklist to identify problems.

14. Chart nutritional care information.

DOCUMENTATION
UNIT XI

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 356. The point total for questions 1-9 is 136; the point total for questions 10-14 is 220.)

1. (14 points)

a.	4	e.	5
b.	6	f.	1
c.	2	g.	7
d.	3		

2. (16 points)

   b, d, e, f, h

3. (12 points)

   a. Contains important information about patient

   b. Is used in determining quality of patient care

   c. Provides communication among all members of health care team

   d. Integrates care provided by each professional involved in treating a patient

4. (4 points)

   a. Confirmation of diet order

   b. Diet history

   c. Nutritional care

   d. Discharge plan

5. (24 points)

   Description should include the following

   a. Reaction to prescribed diet

      1) Acceptance or rejection of foods served

      2) Appetite and intake

ANSWERS TO TEST

b. Attitude of patient

  1) Cooperation or lack of cooperation

  2) Interest or lack of interest in diet instructions

c. Adequacy of patient's intake — Adequate or inadequate compared to Daily Food Guide

d. Physical limitations that may affect intake

  1) Ill-fitting dentures, no dentures, or no teeth

  2) Difficulty chewing or swallowing

  3) Paralysis

  4) Blindness

6. (12 points)

a. P

b. S

c. S

d. P

7. (30 points)

a. P

b. P

c. G

d. P

e. G

f. G

g. G

h. P

i. P

j. G

8. (12 points)

a, c, d, f

ANSWERS TO TEST

9. (12 points)

   b, c, e, f

10. Evaluated to the satisfaction of the class instructor (30 points)

11. Evaluated to the satisfaction of the class instructor (30 points)

12. Evaluated to the satisfaction of the clinical instructor (75 points)

13. Evaluated to the satisfaction of the clinical instructor (35 points)

14. Evaluated to the satisfaction of the clinical instructor (50 points)

SANITATION IN PATIENT AREAS
UNIT I

UNIT OBJECTIVE

After completing this unit, the student should be able to use acceptable methods of food sanitation in patient areas. This knowledge will be shown by completing assignment sheets, job sheets, and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match to their correct definitions terms associated with sanitation in patient areas.
2. Select from a list sanitation rules for transporting food to patients.
3. State sanitation rules for handling ice and water pitchers.
4. Discuss sanitation rules for food storage at nourishment station.
5. Select from a list sanitation rules for serving nourishments.
6. State sanitation rules for serving beverages.
7. Select from a list sanitation rules for food kept in patient rooms.
8. State sanitation rules for delayed meals.
9. Select from a list sanitation procedures for preparing tube feeding mixtures.
10. State rules for isolation tray preparation.
11. Describe dietary department procedures for sanitary transport of food to patients.
12. Observe sanitary procedures for providing ice and water pitchers.
13. Make recommendations for sanitary food storage in nourishment stations.
14. Make recommendations for sanitation procedures in serving nourishments.
15. Make recommendations for sanitation procedures in serving beverages.
16. Observe dietary department sanitation procedures for serving delayed meals.
17. Observe sanitation procedures for preparing tube feeding mixture.
18. Demonstrate the ability to
    a. Prepare a tube feeding mixture in a sanitary manner.
    b. Prepare an isolation tray.

SANITATION IN PATIENT AREAS
UNIT I

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Provide students with objective sheet.

   B. Provide students with information, assignment, and job sheets.

   C. Discuss unit and specific objectives.

   D. Discuss information and assignment sheets.

   E. Demonstrate and discuss procedures outlined in job sheets.

   F. Develop appropriate learning activities for special needs students.

   G. Review food-borne illnesses by placing name of bacteria on a flash card and asking students to state methods of preventing food-borne illness associated with that particular bacteria.

   H. Plan a field trip to a large hospital, and observe how food is transported to patients.

   I. Review principles of personal hygiene by playing "Million Dollar Pyramid." A topic is given, and the team that can determine from one-word clues the largest number of relevant items in a short time is the winner.

   J. Using a plate, cup, glass, and other utensils, have various students demonstrate how to grasp items properly.

   K. Give test.

   L. Reteach if necessary.

II. Instructional materials

   A. Objective sheet

   B. Suggested activities

   C. Information sheet

   D. Clinical assignment sheets

      1. Clinical Assignment Sheet #1--Describe Dietary Department Procedures for Sanitary Transport of Food to Patients

      2. Clinical Assignment Sheet #2--Observe Sanitary Procedures for Providing Ice and Water Pitchers

      3. Clinical Assignment Sheet #3--Make Recommendations for Sanitary Food Storage in Nourishment Stations

SUGGESTED ACTIVITIES

4. Clinical Assignment Sheet #4--Make Recommendations for Sanitation Procedures in Serving Nourishments

5. Clinical Assignment Sheet #5--Make Recommendations for Sanitation Procedures in Serving Beverages

6. Clinical Assignment Sheet #6--Observe Dietary Department Sanitation Procedures for Serving Delayed Meals

7. Clinical Assignment Sheet #7--Observe Sanitation Procedures for Preparing Tube Feeding Mixture

E. Answers to clinical assignment sheets

F. Clinical job sheets

1. Clinical Job Sheet #1--Prepare a Tube Feeding Mixture in a Sanitary Manner

2. Clinical Job Sheet #2--Prepare an Isolation Tray

G. Test

H. Answers to test

III. Unit references

A. Anderson, L., et al. *Nutrition in Nursing.* Philadelphia: J. B. Lippincott Co., 1972.

B. *Being a Food Service Worker,* Student Manual. Chicago: Hospital Research and Educational Trust, 1974.

C. Clements, Irene, and Judy Coffey. *Home Ecomonics I: Basic Core,* rev. by Joyce Sawatzky. Stillwater, Oklahoma: State Department of Vocational and Technical Education/Curriculum and Instructional Materials Center, 1977.

D. *Factors Affecting Tolerance to Tube Feedings.* Minneapolis: Doyle Pharmaceutical Co., n.d.

E. *Sanitation in Hospital Food Service.* Chicago: American Hospital Association, 1964.

(NOTE: This reference is a compilation of articles published in the American Hospital Association's journal, *Hospitals.*)

SANITATION IN PATIENT AREAS
UNIT I

INFORMATION SHEET

I. Terms and definitions

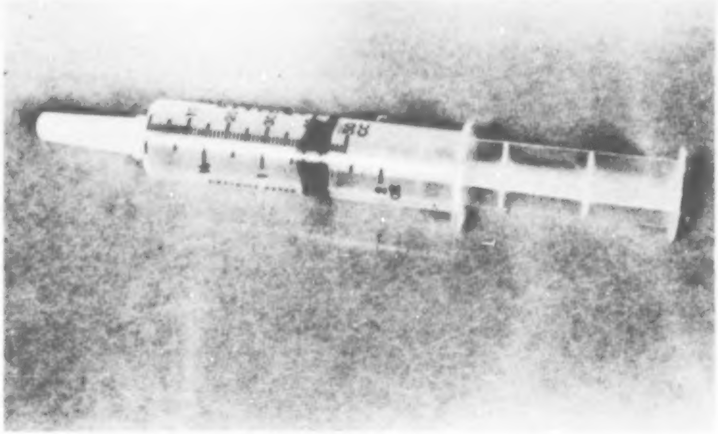
   A. Sanitary--Clean, healthy condition; free of dirt and infectious or disease-causing agents

   B. Nourishment--Supplemental feeding to provide additional calories and nutrients

   C. Asepto syringe--Special tube (syringe) used to feed patients by mouth (Figure 1)

   EXAMPLE:

FIGURE 1



   D. Tube feeding--Liquid mixture given to patients through feeding tubes

   E. Disposable--That which can be discarded after one use

   F. Isolation tray--Tray prepared for a patient so that it can be disposed of in a manner to prevent spread of an infection or contagious disease

   G. Nourishment station--Small kitchen in patient area from which supplemental beverages and foods are dispensed

II. Sanitation rules for transporting food to patients (Clinical Assignment Sheet #1)

   A. Use enclosed carts for transporting food

INFORMATION SHEET

B. Wrap individually food items not transported on an enclosed cart

C. Hold hot foods above 140°F during transit

D. Hold cold foods below 40°F during transit

(NOTE: Proper equipment must be used to ensure that correct hot and cold temperatures are held.)

III. Sanitation rules for handling ice and water pitchers (Clinical Assignment Sheet #2)

A. Serve ice from a covered container

B. Never handle ice with hands; pick up with tongs or a scoop

(NOTE: If the scoop or tongs fall into the ice, lift out with utensil, never with hands.)

C. Keep ice machines clean and sanitized

(NOTE: Do not store ice scoop in ice machine.)

D. Wash and sanitize water pitchers daily

IV. Sanitation rules for food storage at nourishment station (Clinical Assignment Sheet #3)

A. Refrigerators

1. Use for food storage only

(NOTE: No drugs or medicines should be stored in food refrigerator. No employee meals should be stored in the same refrigerator with food for patients.)

2. Keep clean and sanitary

B. Drawers

1. Wrap flatware or serving utensils stored in drawers

2. Place packets of sugar, salt, pepper in covered containers

C. Dishes

1. Return used cups or glasses to the dietary department for sanitizing

2. Keep cabinet dish storage area clean and sanitary

D. Asepto syringes--Wash, sanitize, and store correctly after each use

INFORMATION SHEET

V. Sanitation rules for serving nourishments (Clinical Assignment Sheet #4)

   A. Keep nourishments at correct temperature while transporting to patient rooms

   B. Keep cold beverages on ice, or serve from covered, insulated containers

   (NOTE: Milk should not be transferred from large containers to pitchers for transport. If large dispensers are used, milk should be poured directly into serving glasses and covered for delivery.)

   C. Wrap or cover all nourishments

   D. Mark all nourishments with name of patient and date prepared

   E. Hold nourishments no longer than twenty-four hours before discarding

VI. Sanitation rules for serving beverages (Clinical Assignment Sheet #5)

   A. Serve juice from covered, insulated pitchers, or wrap individually and hold on ice

   B. Serve milk in individual cartons kept on ice, or pour directly from large container into glasses that are covered and set in ice during delivery

   C. Serve hot beverages from an insulated pitcher

   (NOTE: Keep hot beverages hot and cold beverages cold.)

   D. Teach all personnel who serve food to grasp cups, glasses, and other dishes in a sanitary manner

   EXAMPLES: Nurse's aides, candy stripers

VII. Sanitation rules for food kept in patient rooms

   A. Store all food in covered containers

   B. Do not keep perishable food in patient rooms

   C. Do not store food loose in drawers

   EXAMPLES: Sugar packets, salt packets, crackers

VIII. Sanitation rules for delayed meals (Clinical Assignment Sheet #6)

   (NOTE: A delayed meal may be served when the patient returns from X ray or after tests have been completed; the nurse or supervisor will give permission for serving the hold tray.)

   A. Hold food above 140°F or below 40°F, and reheat before serving

   B. Wrap tray food items individually, or place in an enclosed cart for serving

INFORMATION SHEET

C. Hold beverages at correct temperatures

IX. Sanitation procedures for preparing tube feeding mixtures (Clinical Assignment Sheet #7; Clinical Job Sheet #1)

A. Measure accurately, and prepare under rigid sanitation standards

B. Prepare no more than a twenty-four-hour supply

C. Discard any remaining formula after twenty-four hours

D. Label container with patient's name, room number, date, and diet order

E. Store in refrigerator in a closed, airtight container

F. When opening a can of commercial tube-feeding formula, wash top of can, and open with a sanitized can opener

G. After pouring amount of feeding needed, immediately refrigerate the remaining amount

H. Carefully monitor amount of time any tube feeding is held at room temperature

(NOTE: Commercially prepared formulas may be held at room temperature until opened.)

X. Rules for isolation tray preparation (Clinical Job Sheet #2)

(NOTE: It is essential that all isolation techniques be strictly observed in the preparation and service of food to prevent the spread of communicable disease.)

A. Use a disposable tray

B. Use only disposable dishes and flatware

(NOTE: Isolation trays should always be disposed of *in* patient's room by nursing personnel and according to established procedures.)

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SANITATION IN PATIENT AREAS
UNIT I

CLINICAL ASSIGNMENT SHEET #1--DESCRIBE DIETARY DEPARTMENT PROCEDURES FOR SANITARY TRANSPORT OF FOOD TO PATIENTS

NAME ________________________________ SCORE ______________

Observe dietary department sanitary procedures for transporting food to patients. Write an "X" in the appropriate box beside each question. Write comments about each item listed in the spaces provided.

(NOTE: Your comments may be a description of each step as you observe it being done or a recommendation for improving undesirable practices you observe.)

A. Are carts for transporting food enclosed? Yes ☐ No ☐

Comments: ____

____

B. If cart for transporting food is not enclosed, are food items on tray individually wrapped, and is a plate cover used? Yes ☐ No ☐

Comments: ____

____

C. Is the temperature of hot food 140°F or above during transit and palatably hot when it reaches patient? Yes ☐ No ☐

Comments: ____

____

D. Is the temperature of cold food 40°F or below during transit and when food reaches patient? Yes ☐ No ☐

Comments: ____

____

E. What methods are used to keep hot food hot and cold food cold?

____

____

____

____

FSS - 11-C

SANITATION IN PATIENT AREAS
UNIT I

CLINICAL ASSIGNMENT SHEET #2--OBSERVE SANITARY PROCEDURES FOR PROVIDING ICE AND WATER PITCHERS

NAME ______________________________ SCORE ______________

Observe sanitation procedures for providing ice and water pitchers. Write an "X" in the appropriate box beside each question. Write comments about each item listed in the spaces provided.

(NOTE: Your comments may be a description of each step as you observe it being done or a recommendation for improving undesirable practices you observe.)

A. Is ice served to patients from a covered container? Yes ☐ No ☐

Comments: ____

____

B. Is ice picked up with tongs or scoop, never touched with hands? Yes ☐ No ☐

Comments: ____

____

C. Are tongs or scoop dropped into ice container and then picked out with hands? Yes ☐ No ☐

Comments: ____

____

D. Is ice machine cleaned and sanitized on a regular cleaning schedule? Yes ☐ No ☐

Comments: ____

____

E. Are water pitchers washed and sanitized daily and returned to patient rooms? Yes ☐ No ☐

Comments: ____

____

SANITATION IN PATIENT AREAS
UNIT I

CLINICAL ASSIGNMENT SHEET #3--MAKE RECOMMENDATIONS FOR SANITARY FOOD STORAGE IN NOURISHMENT STATIONS

NAME ______________________________ SCORE ______________

Observe food storage in nourishment stations in patient areas. Write an "X" in the appropriate box beside each question. Write recommendations for ways undesirable practices may be improved in the spaces provided

(NOTE: All refrigerators should be equipped with a thermometer, and the temperature should be correct.)

A. Do refrigerators store food items only (no drugs or medicines stored in the refrigerator with food)?

Yes ☐ No ☐

Recommendations: ______________________________

B. Are refrigerators clean, sanitary, and cleaned on a regular basis?

Yes ☐ No ☐

Recommendations: ______________________________

C. Are flatware or serving utensils wrapped when stored in drawers?

Yes ☐ No ☐

Recommendations: ______________________________

D. Are packets of sugar and salt in covered containers?

Yes ☐ No ☐

Recommendations: ______________________________

CLINICAL ASSIGNMENT SHEET #3

E. Are all dishes returned to the dietary department for sanitizing?

Yes ☐ No ☐

Recommendations: ______________________________

____

____

F. Is cabinet dish storage area clean and sanitary?

Yes ☐ No ☐

Recommendations: ______________________________

____

____

SANITATION IN PATIENT AREAS
UNIT I

CLINICAL ASSIGNMENT SHEET #4--MAKE RECOMMENDATIONS FOR SANITATION PROCEDURES IN SERVING NOURISHMENTS

NAME ______________________ SCORE __________

Observe sanitation procedures for serving nourishments. Write an "X" in the appropriate box beside each question. If the answer is "no," recommend ways the procedure can be improved.

A. Are frozen nourishments kept frozen while transported to patient? Yes ☐ No ☐

Recommendations: ______________________

____

____

B. Are cold nourishments kept at 40°F or below while transported to patient? Yes ☐ No ☐

Recommendations: ______________________

____

____

C. Are hot nourishments kept at 140°F or above while transported to patient? Yes ☐ No ☐

Recommendations: ______________________

____

____

D. Are pitchers closed and insulated? Yes ☐ No ☐

Recommendations: ______________________

____

____

E. Are nourishments wrapped or covered when served? Yes ☐ No ☐

Recommendations: ______________________

____

____

CLINICAL ASSIGNMENT SHEET #4

F. Are nourishments marked with name of patient, room number, and date prepared?

Yes ☐ No ☐

Recommendations: ______________________________

G. Are nourishments discarded after twenty-four hours?

Yes ☐ No ☐

Recommendations: ______________________________

SANITATION IN PATIENT AREAS
UNIT I

CLINICAL ASSIGNMENT SHEET #5--MAKE RECOMMENDATIONS FOR SANITATION PROCEDURES IN SERVING BEVERAGES

NAME ______________________________ SCORE ______________

Observe sanitation procedures for serving beverages. Write an "X" in the appropriate box beside each question. Recommend ways the situation may be improved for each item you answer "no."

A. Is juice served from a covered, insulated pitcher or in covered, individual containers and held in ice during delivery? Yes ☐ No ☐

Recommendations: ______________________________

____

____

B. Is milk kept on ice and served in cartons or poured directly from dispenser or carton into a glass that is covered during delivery? Yes ☐ No ☐

Recommendations: ______________________________

____

____

C. Are hot beverages served from an insulated pitcher? Yes ☐ No ☐

Recommendations: ______________________________

____

____

D. Are in-service classes held to instruct all personnel--including nursing--to grasp cups, glasses, and other dishes in a sanitary manner? Yes ☐ No ☐

Recommendations: ______________________________

____

____

SANITATION IN PATIENT AREAS
UNIT I

CLINICAL ASSIGNMENT SHEET #6--OBSERVE DIETARY DEPARTMENT SANITATION PROCEDURES FOR SERVING DELAYED MEALS

NAME ______________________ SCORE __________

Observe dietary department sanitation procedures used for serving delayed meals. Write an "X" in the appropriate box beside each question. Write comments about each item listed in the spaces provided.

(NOTE: Your comments may be a description of each step as you observe it being performed or a recommendation for improving undesirable practices you observe.)

A. Are foods held at 140°F in transit to patient, and are foods refrigerated and reheated before being served to patient? Yes ☐ No ☐

Comments: ______________________

____

B. Are food items individually wrapped, and is the plate covered in transit to patient? Yes ☐ No ☐

Comments: ______________________

____

C. Are hot beverages served hot? Yes ☐ No ☐

Comments: ______________________

____

D. Are cold beverages served cold? Yes ☐ No ☐

Comments: ______________________

____

E. Are trays served in a manner that the patient finds acceptable? Yes ☐ No ☐

If not, how can this procedure be corrected? ______________________

____

____

____

____

FSS - 21-C

SANITATION IN PATIENT AREAS
UNIT I

CLINICAL ASSIGNMENT SHEET #7--OBSERVE SANITATION PROCEDURES FOR PREPARING TUBE FEEDING MIXTURE

NAME ______________________ SCORE __________

Observe sanitation procedures used for preparing tube feedings in your facility. Write an "X" in the appropriate box beside each question. Write comments about each item listed in the spaces provided.

A. Is tube feeding mixture prepared accurately and under rigid sanitation standards? Yes ☐ No ☐

Comments: ______________________________

____

____

B. Is only a twenty-four-hour supply of the feeding mixture prepared at a time? Yes ☐ No ☐

Comments: ______________________________

____

____

C. Is feeding mixture picked up after twenty-four hours and discarded? Yes ☐ No ☐

Comments: ______________________________

____

____

D. Is feeding mixture stored in a closed, airtight container? Yes ☐ No ☐

Comments: ______________________________

____

____

E. Is container labeled with patient's name, room number, date, and diet order? Yes ☐ No ☐

Comments: ______________________________

____

____

CLINICAL ASSIGNMENT SHEET #7

F. When using a commercial tube-feeding mixture, is the can top washed and opened with a sanitized can opener?

Yes ☐ No ☐

Comments: ______________________________

____

____

G. Are all feedings kept at room temperature as short a time as possible?

Yes ☐ No ☐

Comments: ______________________________

____

____

SANITATION IN PATIENT AREAS
UNIT I

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #4--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #5--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #6--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #7--Evaluated to the satisfaction of the clinical instructor

SANITATION IN PATIENT AREAS
UNIT I

CLINICAL JOB SHEET #1--PREPARE A TUBE FEEDING MIXTURE IN A SANITARY MANNER

I. Equipment and supplies

  A. Food supplies

  B. Sanitary, airtight, closed container

  C. Masking tape

  D. Marking pencil

II. Procedure

  A. Prepare tube feeding mixture according to package directions in a sanitary manner with clean, sanitized equipment

  B. Pour tube feeding mixture into clean, sanitized, airtight container

  C. Close container tightly

  D. Place a strip of masking tape on side of container

  E. Mark the patient's name, date prepared, room number, and diet order with marking pencil

SANITATION IN PATIENT AREAS
UNIT I

CLINICAL JOB SHEET #2--PREPARE AN ISOLATION TRAY

I. Equipment and supplies

- A. Disposable tray
- B. Disposable plate, cup, glass, flatware, and other items needed for tray
- C. Food for meal

II. Procedure

- A. Set up disposable tray with disposable dishes, disposable tray card, and other disposable items
- B. Portion food into disposable dishes, and place on disposable tray
- C. Immediately deliver tray to nursing personnel

  (NOTE: Food cools rapidly in disposable dishes.)
- D. Check to see that tray has not been returned to the dietary department with other soiled dishes

  (NOTE: Isolation trays should always be disposed of in patient room by nursing personnel and according to established procedures.)

SANITATION IN PATIENT AREAS
UNIT I

TEST

NAME ______________________________ SCORE ______________

1. Match to their correct definitions terms associated with sanitation in patient areas. Write the correct numbers in the blanks.

______a. Clean, healthy condition; free of dirt and infectious or disease-causing agents

______b. Supplemental feeding to provide additional calories and nutrients

______c. Special tube (syringe) used to feed patients by mouth

______d. Liquid mixture given to patients through feeding tubes

______e. That which can be discarded after one use

______f. Tray prepared for a patient so that it can be disposed of in a manner to prevent spread of an infection or contagious disease

______g. Small kitchen in patient area from which supplemental beverages and food are dispensed

1. Nourishment
2. Tube feeding
3. Isolation tray
4. Asepto syringe
5. Disposable
6. Sanitary
7. Nourishment station

2. Select from the following list sanitation rules for transporting food to patients. Write an "X" in the blank before each correct answer.

______a. Wrap individually food items not transported on an enclosed cart

______b. Hold hot foods above 180°F during transit

______c. Hold hot foods above 140°F during transit

______d. Hold cold foods below 32°F during transit

______e. Use enclosed carts for transporting food

______f. Hold cold foods below 40°F during transit

______g. Use open racks to transport food to patients; if a plate cover is used, other foods do not need to be wrapped

TEST

3. State sanitation rules for handling ice and water pitchers.

   a. ______

   b. ______

   c. ______

   d. ______

4. Discuss sanitation rules for food storage at nourishment station.

   a. Refrigerators

      1) ______

      2) ______

   b. Drawers

      1) ______

      2) ______

   c. Dishes

      1) ______

      2) ______

   d. Asepto syringes--______

   ______

5. Select from the following list sanitation rules for serving nourishments. Write an "X" in the blank before each correct answer.

   ______a. Keep cold beverages on ice, or serve from covered, insulated containers

   ______b. Hold nourishments no longer than twenty-four hours before discarding

   ______c. Keep nourishments at correct temperature while transporting to patient rooms

   ______d. Use pitchers with open tops if you are serving nourishments immediately to patients

   ______e. Wrap or cover all nourishments

   ______f. Hold nourishments at room temperature for two hours

   ______g. Mark all nourishments with name of patient and date prepared

TEST

6. State sanitation rules for serving beverages.

   a. ____________________

   b. ____________________

   c. ____________________

   d. ____________________

7. Select from the following list sanitation rules for food kept in patient rooms. Write an "X" in the blank before each correct answer.

   ______a. Store all food in covered containers

   ______b. Do not store wrapped items such as sugar packets, salt packets, and wrapped crackers

   ______c. Do not keep perishable food in patient rooms

   ______d. Do not store food loose in drawers

   ______e. Store closed boxes of crackers in the room

   ______f. Store unwrapped fresh fruit in the room

8. State sanitation rules for delayed meals.

   a. ____________________

   b. ____________________

   c. ____________________

9. Select from the following list sanitation procedures for preparing tube feeding mixtures. Write an "X" in the blank before each correct answer.

   ______a. Leave commercial tube feeding in the can at room temperature once it is opened because there is less danger of bacterial growth

   ______b. Discard any remaining formula after forty-eight hours

   ______c. Store in refrigerator in a closed, airtight container

   ______d. Measure accurately, and prepare under rigid sanitation standards

   ______e. Discard any remaining formula after twenty-four hours

   ______f. After pouring amount of feeding needed, immediately refrigerate the remaining amount

   ______g. Prepare no more than a forty-eight-hour supply

TEST

______h. Label container with patient's name, room number, date, and diet order

______i. Prepare no more than a twenty-four-hour supply

______j. Carefully monitor amount of time any tube feeding is held at room temperature

______k. When opening a can of commercial tube-feeding formula, wash top of can, and open with a sanitized can opener

10. State rules for isolation tray preparation.

    a. ______________________________

    b. ______________________________

(NOTE: Test questions 11-18 list the assignment and job sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

11. Describe dietary department procedures for sanitary transport of food to patients.
12. Observe sanitary procedures for providing ice and water pitchers.
13. Make recommendations for sanitary food storage in nourishment stations.
14. Make recommendations for sanitation procedures in serving nourishments.
15. Make recommendations for sanitation procedures in serving beverages.
16. Observe dietary department sanitation procedures for serving delayed meals.
17. Observe sanitation procedures for preparing tube feeding mixture.
18. Demonstrate the ability to
    a. Prepare a tube feeding mixture in a sanitary manner.
    b. Prepare an isolation tray.

SANITATION IN PATIENT AREAS
UNIT I

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 416. The point total for questions 1-10 is 136; the point total for questions 11-18 is 280.)

1. (14 points)

a.	6	e.	5
b.	1	f.	3
c.	4	g.	7
d.	2		

2. (14 points)

   a, c, e, f

3. (12 points)

   a. Serve ice from a covered container

   b. Never handle ice with hands; pick up with tongs or a scoop

   c. Keep ice machines clean and sanitized

   d. Wash and sanitize water pitchers daily

4. (21 points)

   Discussion should include the following

   a. Refrigerators

      1) Use for food storage only

      2) Keep clean and sanitary

   b. Drawers

      1) Wrap flatware or serving utensils stored in drawers

      2) Place packets of sugar, salt, pepper in covered containers

   c. Dishes

      1) Return used cups or glasses to the dietary department for sanitizing

ANSWERS TO TEST

2) Keep cabinet dish storage area clean and sanitary

d. Asepto syringes--Wash, sanitize, and store correctly after each use

5. (14 points)

a, b, c, e, g

6. (12 points)

a. Serve juice from covered, insulated pitchers, or wrap individually and hold on ice

b. Serve milk in individual cartons kept on ice, or pour directly from large container into glasses that are covered and set in ice during delivery

c. Serve hot beverages from an insulated pitcher

d. Teach all personnel who serve food to grasp cups, glasses, and other dishes in a sanitary manner

7. (12 points)

a, c, d

8. (9 points)

a. Hold food above 140°F or below 40°F, and reheat before serving

b. Wrap tray food items individually, or place in an enclosed cart for serving

c. Hold beverages at correct temperatures

9. (22 points)

c, d, e, f, h, i, j, k

10. (6 points)

a. Use a disposable tray

b. Use only disposable dishes and flatware

11. Evaluated to the satisfaction of the clinical instructor (25 points)

ANSWERS TO TEST

12. Evaluated to the satisfaction of the clinical instructor (25 points)

13. Evaluated to the satisfaction of the clinical instructor (30 points)

14. Evaluated to the satisfaction of the clinical instructor (35 points)

15. Evaluated to the satisfaction of the clinical instructor (20 points)

16. Evaluated to the satisfaction of the clinical instructor (25 points)

17. Evaluated to the satisfaction of the clinical instructor (35 points)

18. Performance skills evaluated to the satisfaction of the clinical instructor
    a. 50 points
    b. 35 points

SUPERVISION OF SANITATION
UNIT II

UNIT OBJECTIVE

After completing this unit, the student should be able to supervise sanitation practices in all areas of the dietary department and in any area of the facility where food is stored. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. State objectives in employee training for good sanitation.
2. Select from a list personal practices for good sanitation.
3. Select from a list rules for sanitary food storage, preparation, and service.
4. Select from a list rules for sanitary practices in receiving food.
5. Select from a list good sanitation practices for dry storage areas.
6. Select from a list rules for sanitary refrigerator storage practices.
7. Describe good sanitation practices for freezer storage.
8. Select from a list sanitation practices in food preparation and holding areas.
9. Discuss sanitation practices for dining room and serving area.
10. Describe factors essential for effective warewashing and storage.
11. Select from a list sanitary practices for employee facilities.
12. State sanitary practices in patient areas.
13. Select from a list sanitary practices for garbage/trash storage and disposal areas.
14. State guidelines for cleaning schedules.
15. Discuss training employees in sanitary practices.
16. Arrange in order steps for training employees.
17. Prepare an example of a dietary cleaning schedule.

OBJECTIVE SHEET

18. Make recommendations to improve employee training.
19. Construct a cleaning schedule for equipment in the dietary department.
20. Evaluate cleaning of equipment.
21. Make recommendations for improving dietary department sanitation.

SUPERVISION OF SANITATION
UNIT II

SUGGESTED ACTIVITIES

I. Suggested Activities

   A. Provide students with objective sheet.

   B. Discuss unit and specific objectives.

   C. Provide students with information and assignment sheets.

   D. Discuss information sheet.

   E. Develop appropriate learning activities for special needs students.

   F. Using a true/false quiz, review basic principles of "Preventing Food-Borne Illnesses" from *Food Service Worker,* Section C, Unit IV.

   G. Ask students to bring an example of the cleaning schedules from their facilities. Compare the various schedules' designs and uses.

   H. Take pictures or slides of improper sanitation practices. Ask students to identify the sanitation error by completing the answer sheet you provide.

   I. Obtain a health department inspection sheet and discuss it with students.

   J. Give test.

   K. Reteach if necessary.

II. Instructional materials

   A. Objective sheet

   B. Suggested activities

   C. Information sheet

   D. Class assignment sheets

      1. Class Assignment Sheet #1 — Prepare an Example of a Dietary Cleaning Schedule

      2. Class Assignment Sheet #2 — Make Recommendations to Improve Employee Training

   E. Answers to class assignment sheets

SUGGESTED ACTIVITIES

F. Clinical assignment sheets

   1. Clinical Assignment Sheet #1 — Construct a Cleaning Schedule for Equipment in the Dietary Department

   2. Clinical Assignment Sheet #2 — Evaluate Cleaning of Equipment

   3. Clinical Assignment Sheet #3 — Make Recommendations for Improving Dietary Department Sanitation

G. Answers to clinical assignment sheets

H. Test

I. Answers to test

III. Unit references

A. *Applied Foodservice Sanitation.* Chicago: National Institute for the Food Service Industry, 1974.

B. *Being a Food Service Worker.* Chicago: Hospital Research and Education Trust, 1974.

C. *Food Equipment Sanitation, Cleaning Procedures.* St. Paul, Minnesota: Economics Laboratory, 1965.

D. *Food Service Equipment,* Standards No. 2. Ann Arbor, Michigan: The National Sanitation Foundation, 1973.

E. Longree, K., and G. G. Blaker. *Sanitary Techniques in Food Service.* New York: John Wiley and Sons, Inc., 1971.

F. Mahaffey, M. J., et al. *Food Service Manual for Health Care Institutions.* Chicago: American Hospital Association, 1981.

G. Richardson, R. M. "Sanitation for Food Service Workers." *Institutions Magazine,* (1969).

H. West, B. B., et al. *Food Service In Institutions,* 5th ed. New York: John Wiley and Sons, Inc., 1977.

I. *You Can Prevent Food-Borne Illnesses,* Public Health Service Publication No. 1105. Washington, D.C.: United States Department of Health, Education, and Welfare, 1963.

SUPERVISION OF SANITATION
UNIT II

INFORMATION SHEET

I. Objectives in employee training for good sanitation (Class Assignment Sheet #2)

   A. Good personal practices

   B. Correct food handling and food protection

   C. Sanitary facilities and equipment

   D. Pest control

II. Personal practices for good sanitation

   A. Be free of infections or illnesses

   B. Wear clean garments

   C. Have a clean body and fingernails

   (NOTE: Do not use nail polish because of its potential to chip into food products and hide dirt.)

   D. Wash hands

   E. Use hair restraints or caps

   F. Develop good personal habits

   EXAMPLES: Do not cough, spit, scratch head, pick pimples.

   G. Avoid smoking around food

   H. Wear no jewelry

   (NOTE: Wedding ring and watch may be exceptions.)

III. Rules for sanitary food storage, preparation, and service

   A. Avoid holding potentially hazardous food at room temperature

   B. Rinse fruits and vegetables thoroughly

   C. Thaw frozen food properly

INFORMATION SHEET

- D. Use separate cutting boards for raw and cooked food

  (NOTE: This includes raw vegetables and meats.)
- E. Use utensils, not hands, to handle food
- F. Grasp dishes and serving utensils correctly
- G. Wash hands before handling food, equipment, or dishes

IV. Rules for sanitary practices in receiving food

- A. Purchase food from approved sources
- B. Inspect food for spoilage or infestation
- C. Refrigerate perishable food immediately
- D. Place frozen food in freezer immediately
- E. Keep receiving area clean
- F. Remove empty cartons to disposal area immediately

V. Good sanitation practices for dry storage areas

- A. Store food off floor
- B. Keep floor clean and free of debris
- C. Use metal shelving that is 12 inches off floor
- D. Keep area insect and rodent free
- E. Store chemicals separately

  EXAMPLES: Pesticides, cleaning supplies not stored near food
- F. Use first-in, first-out system for storing food supplies
- G. Date merchandise when checked into facility and placed on shelves
- H. Keep storeroom dry

  (NOTE: Moisture could result from leaky pipes or excess humidity.)
- I. Keep storeroom temperature below 70°F, preferably 50°F to 60°F

INFORMATION SHEET

- J. Ventilate storeroom
- K. Remove cartons and trash as soon as possible after emptying

VI. Rules for sanitary refrigerator storage practices

- A. Maintain correct temperature for food storage
- B. Provide accurate thermometers
- C. Keep refrigerator clean and odor free
- D. Store food off the floor in walk-in refrigerator
- E. Do not overload refrigerators
- F. Store raw food separate from cooked food
- G. Store food in shallow containers
- H. Cover all food at all times
- I. Place food to allow good air circulation

VII. Good sanitation practices for freezer storage

- A. Temperature — Maintain constant temperature at 0°F or below
- B. Thermometer — Have an accurate one, routinely monitored, in each unit
- C. Defrosting — Perform as needed to ensure proper temperatures for food holding
- D. Air circulation — Allow adequate circulation of air to maintain proper temperature of frozen food products

  (NOTE: Place items to allow good air circulation.)
- E. Cleanliness — Keep freezer clean and odor free

VIII. Sanitation practices in food preparation and holding areas

- A. Keep food preparation area clean and sanitary
- B. Keep floor area clean and dry
- C. Clean and sanitize food preparation equipment between uses

  EXAMPLES: Clean and sanitize grinder, meat slicer, chopper, mixer, can opener.

INFORMATION SHEET

- D. Clean and properly sanitize utensils
- E. Store utensils in a sanitary manner
- F. Do not store cleaning supplies and pesticides in food preparation area
- G. Do not use cook's sinks for employee handwashing or dumping of mop water
- H. Allow no evidence of rodents or insects
- I. Wash hands after handling raw food
- J. Hold cold foods at 40°F or below
- K. Maintain hot foods above 140°F

IX. Sanitation practices for dining room and serving area

- A. Keep dining room floor, tables, and chairs clean and dry
- B. Clean, sanitize, and store dishes in sanitary manner
- C. Clean and sanitize cleaning cloths
- D. Store and present flatware and serving utensils in a sanitary manner

  EXAMPLE: Store flatware with handles up, and then present flatware in containers so that eating end cannot be touched.

X. Factors essential for effective warewashing and storage

- A. Hot water
  - 1. Sufficient amount available
  - 2. Temperature of wash and rinse water correct for type of equipment used
- B. Preparation of dishes and utensils prior to washing
  - 1. Prescraped
  - 2. Rinsed

    (NOTE: It may be necessary to presoak some items, especially flatware.)

INFORMATION SHEET

C. Detergent

1. Correct type available

2. Correct amount used

D. Worker hygiene — Hands washed and sanitized after handling soiled dishes and before removing clean dishes

(NOTE: Assigning separate workers for clean and dirty dishes is preferable.)

E. Equipment care

1. Dishwasher cleaned after each use

2. Jets and nozzles cleaned of food particles and other obstructions

F. Drying — All dishes and utensils air dried

XI. Sanitary practices for employee facilities

A. Keep employee facilities clean, dry, and odor free

B. Have sufficient soap, towels, and tissue available in toilet area

C. Have proper receptacles available for waste materials

D. Do not store soiled aprons, uniforms in lockers

E. Keep any food stored in lockers wrapped or in containers

F. Keep facilities free of rodents and insects

XII. Sanitary practices in patient areas

A. Do not store food in patient rooms unless food is in a covered plastic container at correct temperature

B. Hold all food in nourishment stations at correct storage temperature

C. Keep all food in nourishment stations covered or wrapped and stored in a correct manner

D. Transport all food covered or wrapped and held at correct temperatures

XIII. Sanitary practices for garbage/trash storage and disposal areas

A. Keep garbage storage area clean

B. Keep garbage storage area odor free

INFORMATION SHEET

C. Keep garbage containers clean and sanitary inside and out

D. Clean up trash or garbage spilled around the dumpster

E. Keep premises free of rats, ratholes, or nests

F. Eliminate flies around garbage or refuse dumpster

G. Schedule frequent pickup of trash and garbage

H. Use can liners in all garbage containers

I. Tie garbage bags tightly before taking to dumpster

J. Dispose of mop water properly

XIV. Guidelines for cleaning schedules (Class Assignment Sheet #1; Clinical Assignment Sheets #1-#3)

A. Include all areas and all equipment

B. State *what* to clean

C. State *who* is to clean it

D. State *how* to clean it

E. State *when* to clean it

F. Have both employee and supervisor date and sign cleaning schedule when task is completed

G. Evaluate effectiveness continually

XV. Training employees in sanitary practices

A. Is important element of supervisor's job for good sanitation practices

B. May make difference between success or failure in consistently maintaining high sanitation standards

C. Should be conducted on a year-round basis

(NOTE: Training should not be a "crash" method and should not be assigned to another employee.)

D. Use materials that are accurate, and include source of information

EXAMPLE: Use materials from National Sanitation Foundation, U.S. Public Health Service.

INFORMATION SHEET

E. Should be scheduled so that all employees can benefit

(NOTE: Training should include part-time and relief personnel.)

F. Should provide for evaluation of training effectiveness

XVI. Steps for training employees

A. Prepare worker

(NOTE: Put the worker at ease; find out what is already known.)

B. Present operation

(NOTE: Tell, show, illustrate, and question patiently.)

C. Have worker perform operation

(NOTE: Observe worker's performance; have worker repeat operation until a satisfactory level is achieved.)

D. Follow up worker's performance

(NOTE: Allow worker to work independently. Check on worker performance frequently, but do not take over.)

SUPERVISION OF SANITATION
UNIT II

CLASS ASSIGNMENT SHEET #1 — PREPARE AN EXAMPLE OF A DIETARY CLEANING SCHEDULE

NAME ________________________ SCORE ____________

Keeping to a dietary cleaning schedule helps ensure that all areas and equipment meet sanitation requirements.

Following the example given, prepare a dietary cleaning schedule for a refrigerator and range top.

EXAMPLE:

DIETARY CLEANING SCHEDULE

Item of Equipment	Employee Assigned	Cleaning Product	Daily Cleaning	Periodic Cleaning
Refrigerators Freezers Walk-in boxes		Cleaner/sanitizer used in facility	Wipe out bottom of boxes for spills or drips. Straighten and organize.	Remove all food weekly. Remove all shelves, wash in sink with cleaning solution. Wash walls and floor of unit. Scrub floors of walk-in boxes. Wash outside of upright refrigerators and freezers. Use sanitizing agent to keep coolers free of odors. Replace food.
Meat grinders Slicers Food choppers		Cleaner/sanitizer used in facility	Wash all surfaces with cleaning solution. Disassemble equipment and soak removable parts in cleaning solution. Rinse with warm water and sanitizing agent. Air dry. Reassemble machines.	
Steam tables		Cleaner/sanitizer used in facility	Wash steam table with warm water and cleaning solution. Brush sidewalls and pipes. Rinse with warm water and sanitizer. Air dry.	Clean weekly to prevent scale buildup. Prepare mild acid solution in steam table. Soak for 30 minutes and brush surfaces. Drain and rinse with warm water.

CLASS ASSIGNMENT SHEET #1

DIETARY CLEANING SCHEDULE

Item of Equipment	Employee Assigned	Cleaning Product	Daily Cleaning	Periodic Cleaning
Refrigerator				
Range top (NOTE: Describe for burners or hot top as appropriate for the range in your facility.)				

SUPERVISION OF SANITATION
UNIT II

CLASS ASSIGNMENT SHEET #2 — MAKE RECOMMENDATIONS TO IMPROVE EMPLOYEE TRAINING

NAME ______________________________ SCORE ____________

One of the keys to maintaining high sanitation standards is employee training. The following case studies are designed to give you practice in identifying needs and planning to correct sanitation problems related to employee training.

Read the following case studies, and write your answers in the space provided.

CASE STUDY #1

One otherwise ordinary Thursday afternoon, Tim received an unexpected visit from the Health Department. The visit was a surprise because the sanitarian had conducted his regular inspection only a week before, and except for minor deficiencies gave Tim's dietary department a clean bill of health.

The news today was a different story. Several residents had become ill after eating lunch yesterday. It looked like trouble. Whatever the outcome, the facility's reputation was in jeopardy. It was agreed that no case of food poisoning had ever occurred in the facility before. But action to determine the cause of these cases, and head off any further outbreak, must be initiated immediately.

Tim and the sanitarian got down to business. Test samples from possible contamination sites were taken to the laboratory, with the following results: a roast beef and gravy entree was identified as the source of the disease germs implicated. It had happened here. Personnel error was involved in what was clearly a serious breakdown in the dietary department food protection program.

Adapted with permission of the National Institute for the Foodservice Industry from *Applied Foodservice Sanitation Coursebook*, second edition, 1978.

After taking steps to rectify the immediate situation, what should the supervisor do to prevent a recurrence?

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CLASS ASSIGNMENT SHEET #2

CASE STUDY #2

At last report we left Tim in the most serious predicament of his career as a food service supervisor: an outbreak of food poisoning traced to his dietary department.

As we might expect, he has recovered from the shock and is busy organizing a training program and doing a number of other things such as self-inspection aimed at warding off future troubles.

At an earlier time, Tim might have treated a sanitation checklist as a means of getting ready for the public health officer. But now inspection items have become more than words on a check sheet. They are real things to do to protect food and the people who eat it. Far from trying to get the jump on an inspector, Tim would welcome the most searching inspection that would reveal any deficiencies. He would do anything to avoid another illness incident.

With characteristic enthusiasm, Tim went all out for self-inspection, making the rounds himself every day and checking every operation personally. By week's end he was nearly exhausted. A routine event shifted his attention to training, and he realized he had almost forgotten about it. Then suddenly he saw the light: inspection and training. He put the two together, and the answer was clear.

Adapted with permission of the National Institute for the Foodservice Industry from *Applied Foodservice Sanitation Coursebook*, second edition, 1978.

What is the moral to this story?

SUPERVISION OF SANITATION
UNIT II

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

Answer should include the following

DIETARY CLEANING SCHEDULE

Item of Equipment	Employee Assigned	Cleaning Product	Daily Cleaning	Periodic Cleaning
Refrigerator	A.M. diet aide	(NOTE: Product may differ from facility to facility.)	Wipe spills inside unit. Wipe off outside of unit.	Weekly — Remove all food. Remove shelving and any removable equipment to the wash sink. Scrub with a brush in a soap solution. Rinse with clear water. Sanitize. Scrub inside unit with brush and soap solution. Wash walls, floor, door hinges, latches, and gaskets of unit. Rinse well. Return shelving to unit. Replace food.
Range top	A.M. cook		Remove burner parts and place in sink in soap solution. Wash top of stove, using a stiff-bristled brush. Rinse top of range; complete washing of burner parts; rinse. Return parts to range and place in position.	Wash entire outside of range with soap solution. Rinse well. If gas range, clean gas jets.

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #2

CASE STUDY #1

Answer may include the following

A. Proper supervision, careful monitoring of time and temperature as applied to food on the serving line, and personal hygiene are several ways to prevent a recurrence

B. The only long-term solution to prevent a recurrence is training

C. A year-round training program in food service sanitation for all employees must be considered an indispensable follow-up to Tim's immediate action plan

D. Nothing less than qualified personnel can ensure that only safe food will be served

CASE STUDY #2

Answer may include the following

A. Inspection is only as good as its follow-up, and Tim cannot do it all

B. Continuous training and supervision are necessary

C. Trained supervisors and employees will provide sanitation at the source

SUPERVISION OF SANITATION
UNIT II

CLINICAL ASSIGNMENT SHEET #1 — CONSTRUCT A CLEANING SCHEDULE FOR EQUIPMENT IN THE DIETARY DEPARTMENT

NAME ______________________________ SCORE ______________

To ensure that all equipment in the dietary department will be kept sanitary, an organized approach is essential. A cleaning schedule is a helpful tool in assigning responsibility as well as specifying when and how to clean equipment.

PART I

List all equipment in the dietary department that must be cleaned.

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PART II

Using the example given in Class Assignment Sheet #1, construct a cleaning schedule for all equipment in the dietary department. State *what* to clean, *who* is to clean it, *how* to clean it, and *when* to clean it.

SUPERVISION OF SANITATION
UNIT II

CLINICAL ASSIGNMENT SHEET #2 — EVALUATE CLEANING OF EQUIPMENT

NAME ______________________ SCORE __________

For effective supervision of sanitation, it is helpful to have a procedure for documenting the fact that cleaning assignments have been completed. Posting a chart for employees to date and initial as assignments are completed is a good method of documentation.

Evaluate cleaning of equipment as assigned for three days. Supervise and check to see that the cleaning chart has been dated and signed by the employee performing the task. Use the cleaning record on the following page to record which equipment is to be cleaned and when the cleaning is completed.

(NOTE: If a similar procedure is already in use in your facility, your clinical instructor may have you follow it.)

EXAMPLE:

PERIODICAL CLEANING RECORDS

Area: Storage

Frequency: Weekly

Description:	Date	Date	Date	Date	Date	Date	Date
Walk-in Refrigerator	3/15/8- EB						

CLINICAL ASSIGNMENT SHEET #2

PERIODICAL CLEANING RECORDS

Area: Storage

Frequency: Weekly

Description:	Date	Date	Date	Date	Date	Date	Date

SUPERVISION OF SANITATION
UNIT II

CLINICAL ASSIGNMENT SHEET #3 — MAKE RECOMMENDATIONS FOR IMPROVING DIETARY DEPARTMENT SANITATION

NAME ______________________________ SCORE ______________

It is important that the food service supervisor periodically evaluate the overall sanitation in the dietary department. A checklist is an effective way to evaluate sanitation and identify the need for revisions in cleaning schedules, cleaning procedures, and employee training.

PART I

Analyze dietary department sanitation by completing the sanitation checklist on the following pages.

PART II

Based on the sanitation checklist you completed in PART I, make recommendations to improve dietary department sanitation.

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CLINICAL ASSIGNMENT SHEET #3

SANITATION CHECKLIST

Checked by: ______________________________ Date: ________________________

STANDARD	Deficiency	Comments	Date Corrected
PERSONNEL			
1. Head and facial hair is covered with hairnet, cap, or other adequate restraint			
2. Uniforms and aprons are clean and neat			
3. Fingernails are short, clean, and unpolished			
4. Employees are clean, neat, and well groomed			
5. Employees are free from colds, other communicable diseases, and infected cuts or burns			
6. Employees smoke or eat only in designated areas			
7. Employees wash hands frequently at conveniently located hand sinks			
8. Disposable gloves are properly used by food handlers			
9. Medical examination schedule for employees is followed			
10. Employees wear minimal amount of jewelry			
RECEIVING			
1. Immediately upon receipt, food is inspected for spoilage or infestation			
2. Nonfood supplies are immediately inspected for infestation			
3. All food supplies are promptly moved to proper storage areas			
4. Receiving area is clean and free of food debris, boxes, cans, and other refuse			

Source: *Food Service Manual for Health Care Institutions*, by Mahaffey, Mennes and Miller, reprinted with the permission of the American Hospital Association. Copyright 1981.

CLINICAL ASSIGNMENT SHEET #3

STANDARD	Deficiency	Comments	Date Corrected
5. Outside doors are equipped with self-closing devices and are kept closed			
6. Door openings are screened or equipped with fly fans			
DRY STORAGE			
1. Shelves are placed high enough to permit floor cleaning and to abide by local ordinances			
2. Walls, floors, and shelves are clean			
3. All food is stored off the floor			
4. Storage area is dry and well ventilated, and temperature is maintained lower than 70°F (21°C)			
5. Shelves are placed away from walls to permit ventilation and easy cleaning			
6. Opened bulk-food supplies are stored in labeled plastic or metal containers with tight-fitting lids			
7. Nonfood supplies are stored separately			
8. Potentially harmful chemicals and cleaning supplies are stored separately			
9. A properly functioning thermometer is kept in the area			
10. Empty cartons and trash are removed from the area			
11. Storage area is free from uninsulated steam and hot water pipes or other heat-producing or moisture-producing devices			
REFRIGERATOR AND FREEZER STORAGE			
1. Walls, floors, and shelves are constructed of easily cleaned materials			

CLINICAL ASSIGNMENT SHEET #3

STANDARD	Deficiency	Comments	Date Corrected
2. Walls, floors, and shelves are free of spills and debris			
3. Properly functioning thermometers are located in each unit			
4. Proper temperatures are maintained: 45°F (7°C) or lower in refrigerators and 0°F (-18°C) or lower in freezers			
5. Foods are arranged to permit air circulation			
6. All foods are stored off the floor			
7. Cooked foods are stored above raw foods			
8. Foods are properly wrapped or covered			
9. Frost buildup is kept to a minimum			
10. Foods are dated and rotated according to standard procedures			
FOOD PRODUCTION			
1. Floors, walls, and ceilings are clean			
2. Ventilation hoods are provided where needed and are free from grease and dust			
3. Adequate light fixtures are provided, guarded, and kept clean			
4. Equipment and utensils are constructed to meet National Sanitation Foundation (NSF) standards			
5. Equipment is placed to allow easy access for cleaning			
6. Inside and outside surfaces of all cooking equipment and utensils are cleaned and sanitized regularly			

CLINICAL ASSIGNMENT SHEET #3

STANDARD	Deficiency	Comments	Date Corrected
7. Utensils and equipment are stored in clean, dry places at sufficient height from the floor and are protected from flies, dust, and other contaminants			
8. Foods are stored in production areas in clean, tightly closed containers			
9. Sanitary procedures are used for handling foods during processing			
10. Adequate clean cloths for production and cleaning purposes are provided			
11. Soiled towels and cloths are properly stored			
12. Dropped items or spills are picked up or cleaned up immediately			
13. Frozen foods are defrosted under refrigeration or in cold running water — not at room temperature — in original wrapping			
14. If recommended by local health ordinances, disposable gloves are used to handle food			
15. After each use, preparation equipment is cleaned and sanitized			
16. After each meal, can openers are cleaned and sanitized			
17. Adequate garbage or trash receptacles are conveniently located, frequently emptied, and kept clean			
18. Separate sinks are used for washing raw foods, hands, and utensils			
19. Hot-holding equipment is used to maintain food at or higher than 140°F (60°C)			
20. Cold-holding equipment is conveniently located and kept clean			

CLINICAL ASSIGNMENT SHEET #3

STANDARD	Deficiency	Comments	Date Corrected
21. Potentially hazardous foods are not allowed to stand at room temperature longer than absolutely necessary during preparation			
22. Metal, stem-indicating thermometers are available and are used to check food temperatures during preparation and holding			
23. Pesticides, cleaning supplies, and other potentially hazardous chemicals are located to avoid possible contamination of foods			
24. Disposable ware for tasting foods, as required during production, is used by employees			
TRANSPORT			
1. Transport equipment is constructed according to NSF standards			
2. Transport containers and carts are regularly cleaned and sanitized			
3. Proper temperatures are maintained during transport: 40°F (7°C) or lower for cold foods; and 140°F (60°C) or higher for hot foods			
4. Transport carts and containers for food and nonfood supplies are covered or tightly closed			
5. Cargo area for motor vehicles used for food transport is clean and free from debris and potentially hazardous materials			
DISPLAY AND SERVICE			
1. Holding equipment and service equipment are constructed according to NSF standards			
2. Equipment is cleaned and sanitized			

CLINICAL ASSIGNMENT SHEET #3

STANDARD	Deficiency	Comments	Date Corrected
3. Service and dining area floors and walls are clean			
4. Tables are washed and sanitized after each use			
5. Food on display is protected from contamination by packaging, protector devices, or other effective means			
6. Potentially hazardous food is held at lower than 40°F (7°C) or higher than 140°F (60°C)			
7. Temperatures are checked periodically during meal service			
8. Employees handle food with utensils or disposable gloves			
9. Suitable dispensing equipment for trays and other tableware is used			
10. Condiments for self-service use are protected from consumer contamination			
11. Milk and milk products are served in unopened, commercially filled containers or from sanitary bulk dispensers			
12. An adequate amount of tableware is provided for self-service			
13. Leftover foods are not served again			
14. Ice is properly dispensed by employees or through self-service equipment			
15. Adequate means are provided for the removal of soiled tableware by consumers or employees			
WARE-WASHING			
1. Dishwashing machines and sinks are constructed according to NSF standards			

CLINICAL ASSIGNMENT SHEET #3

STANDARD	Deficiency	Comments	Date Corrected
2. Prior to washing, tableware and utensils are scraped and flushed			
3. Properly operating thermometers for each dishwasher compartment are provided			
4. Proper wash and rinse temperatures during dishwashing are maintained			
5. Proper temperatures for manual warewashing are maintained			
6. Automatic detergent and sanitizer dispensers operate properly			
7. Liquid sanitizers, in the proper concentration, are used where necessary			
8. All tableware and utensils are air-dried after sanitizing			
9. Employees use proper methods for handling sanitized tableware and utensils			
10. Equipment too large for immersion is sanitized by steam and chemical sanitizers			
11. Cleaned and sanitized tableware and utensils are properly stored			
12. Dishwashers and sinks are thoroughly cleaned after use			
GARBAGE, TRASH DISPOSAL, HOUSEKEEPING			
1. Adequate nonabsorbent trash/garbage containers are provided throughout the facility			
2. Containers are emptied frequently			
3. Containers are regularly washed and sanitized			

CLINICAL ASSIGNMENT SHEET #3

STANDARD	Deficiency	Comments	Date Corrected
4. Garbage or trash storage area is protected from insect or rodent infestation			
5. In accordance with local ordinances, garbage and/or trash is frequently disposed			
6. Proper storage is available for brooms, mops, and other cleaning utensils outside of food production and service areas			
EMPLOYEE FACILITIES			
1. Adequate locker and rest room facilities are provided			
2. Locker areas and rest rooms are kept clean and free from odor			
3. Sanitary equipment is operational and clean			
4. Adequate supplies for rest rooms are provided			
5. Adequate receptacles for waste materials and soiled linens are provided			

SUPERVISION OF SANITATION
UNIT II

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

SUPERVISION OF SANITATION
UNIT II

TEST

NAME ______________________________ SCORE ____________

1. State objectives in employee training for good sanitation.

a. ____

b. ____

c. ____

d. ____

2. Select from the following list personal practices for good sanitation. Write an "X" in the blank before each correct answer.

______a. Be free of infections or illness

______b. Wear clean garments

______c. Have a clean body and fingernails

______d. Wear jewelry for good appearance

______e. Wash hands

______f. Use hair restraints or caps

______g. Wear hairnets in all food service areas except warewashing

______h. Develop good personal habits

______i. Cover nose and mouth with apron when coughing or sneezing

______j. Avoid smoking around food

______k. Wear no jewelry

______l. Smoke only in the storeroom

3. Select from the following list rules for sanitary food storage, preparation, and service. Write an "X" in the blank before each correct answer.

______a. Rinse fruits and vegetables thoroughly

______b. Thaw frozen foods at room temperature

______c. Grasp dishes and serving utensils correctly

TEST

______d. Wash hands before handling food, equipment, or dishes

______e. Use hands to handle food

______f. Use separate cutting boards for raw and cooked food

______g. Hold foods at room temperature

4. Select from the following list rules for sanitary practices in receiving food. Write an "X" in the blank before each correct answer.

______a. Purchase canned foods from damaged-freight outlets

______b. Inspect food for spoilage or infestation

______c. Place frozen foods in freezer when convenient

______d. Keep receiving area clean

______e. Remove empty cartons to disposal area immediately

______f. Refrigerate perishable foods as soon as canned goods have been properly stored

5. Select from the following list good sanitation practices for dry storage areas. Write an "X" in the blank before each correct answer.

______a. Store boxes on floor until opened

______b. Keep storeroom dry

______c. Use metal shelving that is 2 inches off floor

______d. Remove cartons and trash as soon as possible after emptying

______e. Store chemicals in clearly marked containers in storeroom with food

______f. Use first-in, first-out system for storing food supplies

______g. Keep floor clean and free of debris

______h. Keep storeroom temperature below 70°F, preferably 50°F to 60°F

______i. Keep storeroom unventilated

______j. Date merchandise when checked into facility and placed on shelves

______k. Keep area insect and rodent free

TEST

6. Select from the following list rules for sanitary refrigerator storage practices. Write an "X" in the blank before each correct answer.

_____a. Maintain correct temperature for food storage

_____b. Store food in deep containers

_____c. Cover only foods ready to be served

_____d. Provide accurate thermometers

_____e. Keep refrigerator clean and odor free

_____f. Store food on the floor in walk-in refrigerator

_____g. Do not overload refrigerators

_____h. Store raw food with cooked food

_____i. Place food to allow good air circulation

7. Describe good sanitation practices for freezer storage.

a. Temperature — ______________________________

b. Thermometer — ______________________________

c. Defrost — ______________________________

d. Air circulation — ______________________________

e. Cleanliness — ______________________________

8. Select from the following list sanitation practices in food preparation and holding areas. Write an "X" in the blank before each correct answer.

_____a. Keep food preparation area clean and sanitary

_____b. Keep floor area clean and dry

_____c. Clean and sanitize food preparation equipment between uses

_____d. Do not wash and sanitize meat slicer after the noon meal when it is going to be used again at the evening meal

_____e. Clean and properly sanitize utensils

_____f. Store utensils in a sanitary manner

TEST

______g. Store pans with the open side up

______h. Store equipment-cleaning supplies in food preparation area

______i. Do not use cook's sinks for employee handwashing or dumping of mop water

______j. Allow no evidence of rodents or insects

______k. Wash hands after handling raw food

______l. Hold cold foods at 40°F or below

______m. Maintain hot foods above 140°F

______n. Keep food at palatable serving temperature on a steam table

9. Discuss sanitation practices for dining room and serving area.

____

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____

10. Describe factors essential for effective warewashing and storage.

a. Hot water — ______________________________

____

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b. Preparation of dishes and utensils prior to washing — ______________

____

____

c. Detergent — ______________________________

____

____

TEST

d. Worker hygiene — ______________________________

e. Equipment care — ______________________________

____

____

f. Drying — ______________________________

11. Select from the following list sanitary practices for employee facilities. Write an "X" in the blank before each correct answer.

_____a. Keep employee facilities clean, dry, and odor free

_____b. Have sufficient soap, towels, and tissue available in toilet area

_____c. Have proper receptacles available for waste materials

_____d. Store dirty uniforms and aprons in employee lockers

_____e. Keep any food stored in lockers wrapped or in containers

_____f. Expect signs of rodents and insects in employee facilities because of food in the area

_____g. Do not store soiled aprons, uniforms in lockers

12. State sanitary practices in patient areas.

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

13. Select from the following list sanitary practices for garbage/trash storage and disposal areas. Write an "X" in the blank before each correct answer.

_____a. Keep garbage storage area clean

_____b. Keep garbage storage area odor free

_____c. Keep garbage containers clean and sanitary inside and out

TEST

_____d. Do not be concerned about cleaning dumpsters because they are not the facility's responsibility

_____e. Keep premises free of rats, ratholes, or nests

_____f. Eliminate flies around garbage or refuse dumpster

_____g. Schedule frequent pickup of trash and garbage

_____h. Avoid using can liners because they are too expensive

_____i. Do not tie garbage bags that are too full before throwing into the dumpster

_____j. Dispose of mop water properly

14. State guidelines for cleaning schedules.

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

e. ______________________________

f. ______________________________

g. ______________________________

15. Discuss training employees in sanitary practices.

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TEST

16. Arrange in order steps for training employees. Write a "1" before the first step, a "2" before the second step, and so on.

    _____a. Present operation

    _____b. Have worker perform operation

    _____c. Prepare worker

    _____d. Follow up worker's performance

(NOTE: Test questions 17-21 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

17. Prepare an example of a dietary cleaning schedule.

18. Make recommendations to improve employee training.

19. Construct a cleaning schedule for equipment in the dietary department.

20. Evaluate cleaning of equipment.

21. Make recommendations for improving dietary department sanitation.

SUPERVISION OF SANITATION
UNIT II

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 663. The point total for questions 1-16 is 288; the point total for questions 17-21 is 375.)

1. (16 points)

   a. Good personal practices

   b. Correct food handling and food protection

   c. Sanitary facilities and equipment

   d. Pest control

2. (24 points)

   a, b, c, e, f, h, j, k

3. (14 points)

   a, c, d, f

4. (12 points)

   b, d, e

5. (22 points)

   b, d, f, g, h, j, k

6. (18 points)

   a, d, e, g, i

7. (15 points)

   Description should include the following

   a. Temperature — Maintain constant temperature at 0°F or below

   b. Thermometer — Have an accurate one, routinely monitored, in each unit

ANSWERS TO TEST

- c. Defrosting — Perform as needed to ensure proper temperatures for food holding
- d. Air circulation — Allow adequate circulation of air to maintain proper temperatures of frozen food products
- e. Cleanliness — Keep freezer clean and odor free

8. (28 points)

a, b, c, e, f, i, j, k, l, m

9. (12 points)

Discussion should include the following

- a. Keep dining room floor, tables, and chairs clean and dry
- b. Clean, sanitize, and store dishes in sanitary manner
- c. Clean and sanitize cleaning cloths
- d. Store and present flatware and serving utensils in a sanitary manner

10. (30 points)

Description should include the following

- a. Hot water
  - 1. Sufficient amount available
  - 2. Temperature of wash and rinse water correct for type of equipment used
- b. Preparation of dishes and utensils prior to washing
  - 1. Prescraped
  - 2. Rinsed
- c. Detergent
  - 1. Correct type available
  - 2. Correct amount used

ANSWERS TO TEST

d. Worker hygiene — Hands washed after handling soiled dishes and before removing clean dishes

e. Equipment care

1. Dishwasher cleaned after each use

2. Jets and nozzles cleaned of food particles and other obstructions

f. Drying — All dishes and utensils air dried

11. (14 points)

a, b, c, e, g

12. (8 points)

a. Do not store food in patient rooms unless food is in a covered plastic container at correct temperature

b. Hold all food in nourishment stations at correct storage temperature

c. Keep all food in nourishment stations covered or wrapped and stored in a correct manner

d. Transport all food covered or wrapped and held at correct temperatures

13. (20 points)

a, b, c, e, f, g, j

14. (21 points)

a. Include all areas and all equipment

b. State *what* to clean

c. State *who* is to clean it

d. State *how* to clean it

e. State *when* to clean it

f. Have both employee and supervisor date and sign cleaning schedule when task is completed

g. Evaluate effectiveness continually

ANSWERS TO TEST

15. (18 points)

    Discussion should include the following

    a. Is important element of supervisor's job for good sanitation practices

    b. May make difference between success or failure in consistently maintaining high sanitation standards

    c. Should be conducted on a year-round basis

    d. Use materials that are accurate, and include source of information

    e. Should be scheduled so that all employees can benefit

    f. Should provide for evaluation of training effectiveness

16. (16 points)

    a. 2

    b. 3

    c. 1

    d. 4

17. Evaluated to the satisfaction of the class instructor (25 points)

18. Evaluated to the satisfaction of the class instructor (25 points)

19. Evaluated to the satisfaction of the clinical instructor (75 points)

20. Evaluated to the satisfaction of the clinical instructor (75 points)

21. Evaluated to the satisfaction of the clinical instructor (175 points)

SUPERVISION OF KITCHEN SAFETY
UNIT III

UNIT OBJECTIVE

After completing this unit, the student should be able to supervise safety practices in all areas of the dietary department. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 100 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match to their correct definitions terms associated with supervision of kitchen safety.
2. Distinguish between supervisor's and employee's responsibilities for kitchen safety.
3. State purposes of the Occupational Safety and Health Act (OSHA).
4. Distinguish between employer's and employee's responsibilities to the OSHA.
5. Select from a list basic OSHA regulations regarding food service.
6. Select from a list poor safety attitudes/actions.
7. Select from a list reasons for keeping accident records.
8. Select from a list points to remember about safety reports.
9. State fire safety rules.
10. Complete an incident report.
11. Complete a safety checklist for the dietary department.
12. Train employees in accident prevention.
13. Conduct an in-service training class on fire safety.

SUPERVISION OF KITCHEN SAFETY
UNIT III

SUGGESTED ACTIVITIES

I. Suggested activities

A. Order the following leaflets and booklet from OSHA Publication Distribution Office, U.S. Department of Labor, Room 2-1212, Washington, D.C. 20210.

1. Consumer information leaflets

OSHA — 1 "Job Safety and Health"
OSHA — 2 "Inspecting for Job Safety and Health Hazards"
OSHA — 3 "Record Keeping Requirements"
OSHA — 4 "Employee Rights Under the Federal Job Safety and Health Law"
OSHA — 5 "Punished for Making a Job Safety and Health Complaint — OSHA Can Help!"

2. Booklet — *Noise Control: A Guide for Workers and Employers* — OSHA 30048, 1980.

(NOTE: This booklet is a guide for employers and workers interested in reducing workplace noise. It contains illustrations of different types of noise and gives control measures that can be taken.)

B. Provide students with objective sheet.

C. Discuss unit and specific objectives.

D. Provide students with information and assignment sheets.

E. Discuss information and assignment sheets.

F. Develop appropriate learning activities for special needs students.

G. Review safety information in *Food Service Worker*, Section C, Unit V, and in *Food Production Worker*, Section B, Unit II. Review safety information from equipment units in *Food Service Worker*, Section D, Unit II; *Food Production Worker*, Section C, Unit II; and *Food Service Supervisor*, Section C, Unit III.

H. Give a short quiz to review safe practices in food preparation and cooking, safe practices with kitchen machines, safe practices in serving areas, and safe practices in handling china and glassware.

I. Contact the OSHA representative in your state, and ask him or her to speak to the class concerning OSHA requirements.

SUGGESTED ACTIVITIES

J. Contact the state fire marshal's office or your local fire department to have a representative speak to the class regarding supervision of fire safety.

K. Ask a physician or nurse to conduct a brief session on first aid for common kitchen injuries such as burns, cuts, and strains.

L. Give test.

M. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Class Assignment Sheet #1 — Complete an Incident Report

E. Answers to class assignment sheet

F. Clinical assignment sheets

1. Clinical Assignment Sheet #1 — Complete a Safety Checklist for the Dietary Department

2. Clinical Assignment Sheet #2 — Train Employees in Accident Prevention

3. Clinical Assignment Sheet #3 — Conduct an In-Service Training Class on Fire Safety

G. Answers to clinical assignment sheets

H. Test

I. Answers to test

III. Unit references

A. Grimes, Vici, and Jerald Chessar. *Food Service: Production and Service.* Stillwater, Oklahoma: State Department of Vocational and Technical Education/Curriculum and Instructional Materials Center, 1976.

B. Mahaffey, Mary J., et al. *Food Service Manual for Health Care Institutions.* Chicago: American Hospital Association, 1981.

C. *OSHA Safety and Health Standards.* Washington, D.C.: United States Department of Labor, Occupational Safety and Health Administration, 1981.

SUGGESTED ACTIVITIES

D. *Safety Guide for Health Care Institutions*. Chicago: American Hospital Association and the National Safety Council, 1972.

E. West, B.B., et al. *Food Service in Institutions*, 5th ed. New York: John Wiley and Sons, 1977.

SUPERVISION OF KITCHEN SAFETY
UNIT III

INFORMATION SHEET

I. Terms and definitions

   A. Occupational Safety and Health Act (OSHA) — Legislation passed in 1970 that mandates standards for a safe and healthy work environment for every working man and woman in the nation

   B. Safety committee — Committee with representation from every department to formulate and enforce policies and procedures concerning safety in the institution

   C. Noise level — Volume of sound as measured in decibels and exposure time for the receiver

II. Supervisor's and employee's responsibilities for kitchen safety (Clinical Assignment Sheet #2)

   A. Supervisor's responsibilities

      1. Providing safety training

         (NOTE: Safety training should be included in orientation and repeated regularly in in-service classes.)

      2. Posting safety reminders

         EXAMPLES: Bulletin boards, posters, safety procedures near hazardous equipment

      3. Setting up inspection routines to identify potential problems

         (NOTE: Unsafe practices as well as unsafe conditions should be included.)

      4. Motivating employees to be safety conscious

         EXAMPLES: Award for safe employee of the month, award for the department with a good safety record

      5. Keeping safety records

         EXAMPLE: Incident report

      6. Investigating, analyzing, and preventing accidents

INFORMATION SHEET

B. Employee's responsibilities

1. Coming to work relaxed

2. Coming to work in good health

3. Controlling emotions such as anger, fear, worry, depression

4. Knowing and following safety rules for the job

5. Knowing what to do in an emergency

III. Purposes of the Occupational Safety and Health Act (OSHA)

A. Preserving human resources by assuring every working man and woman in the nation safe and healthful working conditions

B. Creating standards for a safe and healthy work environment

IV. Employer's and employee's responsibilities to the OSHA

A. Employer's responsibilities

1. Ensuring each employee a place of employment free from recognized hazards that cause or are likely to cause death or serious physical harm

2. Posting the Occupational Safety and Health Act

3. Complying with occupational safety and health standards created by the OSHA

4. Posting a list of emergency phone numbers

5. Informing employees of the rules and regulations affecting them

B. Employee's responsibilities

1. Complying with the OSHA rules and regulations

2. Taking personal responsibility for safe actions and conduct

V. Basic OSHA regulations regarding food service

A. Dietary department should have a planned safety training program

B. Dietary department personnel should include someone trained in first aid, and first-aid supplies should be readily available

INFORMATION SHEET

C. Dietary department must have exits sufficient in number for prompt escape in case of fire or other emergencies

D. Dietary department exits must be clearly marked and provide free access

E. Dietary department personnel should use protective eye and face equipment when there is possibility of injury that could be prevented

EXAMPLE: When using harsh cleaning chemicals

F. Noise levels in the dietary department should be checked if considered to be too high

(NOTE: More information about noise levels can be obtained by calling the OSHA office.)

G. All equipment in the dietary department should be maintained in safe working order

EXAMPLES: Regular checking of booster heaters, dishwashers, valves on steam equipment

H. Dietary department should provide a safe environment

EXAMPLES: Sound flooring, adequate lighting, handrails on stairs

VI. Poor safety attitudes/actions

A. Showing off

B. Recklessness

C. Overconfidence

D. Ignorance

E. Unwillingness to recognize importance of safety

F. Laziness

G. "Clowning" on the job

H. Ill temper

VII. Reasons for keeping accident records (Class Assignment Sheet #1)

A. To provide information on number and kind of accidents

B. To create new methods or procedures for avoiding accidents

C. To identify safety training needs

INFORMATION SHEET

VIII. Points to remember about safety reports (Clinical Assignment Sheet #1)

  A. Facility should work out its own reporting forms

  B. Records must be maintained for OSHA

  EXAMPLES: Accident records, minutes of safety committee meetings, maintenance records

  C. Records of *all* employee mishaps should be kept

  (NOTE: Records should be kept even if the injury is not disabling.)

  D. Reports should be completed by the department head

  E. Reports should be read by the administrator

  F. Reports should be studied by the safety committee

IX. Fire safety rules (Clinical Assignment Sheet #3)

  A. Report any fire immediately

  B. Know where fire extinguishers are, and know how to use them

  C. Keep equipment clean to prevent fires caused by grease buildup, especially on vent hoods and filters

  D. Never put water on hot grease or grease fires

  E. Keep matches in closed container

  F. Smoke in designated areas only

  G. Report any gas leaks

  H. Turn off open fires when not in use

SUPERVISION OF KITCHEN SAFETY
UNIT III

CLASS ASSIGNMENT SHEET #1 — COMPLETE AN INCIDENT REPORT

NAME ____ SCORE ________________

This assignment sheet is designed to give you practice in completing safety reports. It is essential that you complete each accident report as specifically and as clearly as possible.

Using the following case study, complete the incident report form on the following page.

Case Study

Mary B., the A.M. cook, was preparing to drain a stockpot of cooked noodles for the lunch meal. As Mary was on her way to the sink to drain the noodles, she slipped on water on the floor. Her feet went out from under her, and she fell on her back, spilling the noodles and scalding her right arm and hip.

The supervisor and Betty, the diet aide, came immediately to Mary's assistance. The nurse in the facility was called to the dietary department, and the nurse called Dr. B. to see Mary.

The physician's statement stated that he could find nothing broken and that Mary's burns required medical treatment. He suggested that Mary take five days off and then return to him for a physician's statement that she could go back to work.

On the following page, fill out the incident report form to report this accident.

FSS - 97-C

CLASS ASSIGNMENT SHEET #1

DIETARY DEPARTMENT INCIDENT REPORT FORM

I. Person involved in incident

Name ____
Last First Middle

Home address ______________________________________

Home phone ____

Name of facility where incident occurred ____________

Position of person involved in incident _____________

II. Incident information

Date of incident: __________________________________

Time of incident: __________________________________ ______A.M. P.M.

Exact location of incident: __________________________

Description of incident by person involved:
(Describe in detail equipment involved, persons involved, injury that occurred, part of body injured, etc.)

____

____

____

____

____

____

____

Witnesses to incident:
(Names, addresses, phone numbers)

____

____

____

____

CLASS ASSIGNMENT SHEET #1

Name of physician or nurse who treated the injury described above:

Comments by physician or nurse who treated the injury:

Was person hospitalized? ____________ Where? ______________________

Date of report

Signature of person preparing report

Signature of person involved in incident

Comments:
(Additional information, if desired)

SUPERVISION OF KITCHEN SAFETY
UNIT III

ANSWERS TO CLASS ASSIGNMENT SHEET

Completed to the satisfaction of the class instructor

SUPERVISION OF KITCHEN SAFETY
UNIT III

CLINICAL ASSIGNMENT SHEET #1 — COMPLETE A SAFETY CHECKLIST FOR THE DIETARY DEPARTMENT

NAME ______________________________ SCORE ______________

It is a useful practice to periodically evaluate the safety of your dietary department.

Complete the safety checklist on the following page. Check "yes" or "no" for each item. Discuss your findings in the space provided below.

After completing the checklist, discuss areas in the dietary department that need improvement.

102-C

CLINICAL ASSIGNMENT SHEET #1

FOOD SERVICE SAFETY CHECKLIST

Location

Date checked

By

Cuts

1. Are knives and other cutting tools stored in racks with blades protected? Yes No
2. Are tools of the correct size used for the work to be done? Yes No
3. Is a board used for cutting, dicing, and mincing? Yes No
4. When a knife is used, is the cut always made downward and never toward the hand? Yes No
5. Are all sharp tools collected on a tray and washed separately? Yes No
6. Are sharp tools ever left in the dishwater? Yes No
7. Are all broken dishes, defective utensils, and opened cans promptly discarded? Yes No
8. Are the knives kept sharp? Yes No

Burns

1. Are there enough potholders or asbestos gloves for all uses? Yes No
2. Are potholders dry and in good repair? Yes No
3. Are potholders always used to handle hot utensils? Yes No
4. Are asbestos gloves used on hot utensils? Yes No
5. Are the handles tight on all pots and lids? Yes No
6. Is a puller or proper tool used to reach into the oven to bring pans to the front of the oven before removing? Yes No
7. Are careful instructions given to new employees for the use of steamers, hot serving tables, and trunnioned kettles? Yes No
8. Is care given to prevent spattering, splashing, or allowing food to boil over? Yes No
9. Is food stirred with a long-handled spoon or paddle? Yes No
10. Are fat fires prevented by not filling fat containers too full? Yes No

CLINICAL ASSIGNMENT SHEET #1

11. Are fat fires extinguished by placing a cover over fire? Yes No

12. Are steam tables, ovens, and stoves allowed to cool before cleaning? Yes No

13. Are pans properly loaded to prevent tipping and splashing hot grease? Yes No

Miscellaneous Accidents

1. Are floors in good repair? Yes No

2. Are floors clean and dry to avoid slipping? Yes No

3. Are traffic lanes straight and "In" and "Out" doors marked to avoid collisions? Yes No

4. Are all traffic lanes, exits, and entrances clear? Yes No

5. Are electric connections made with dry hands? Yes No

6. Are the pilot lights burning and all burners checked before lighting gas? Yes No

7. Are trays loaded and carried carefully? Yes No

8. Are trays loaded to avoid tilting and overcrowding? Yes No

9. Are closet doors kept closed? Yes No

10. Are floor mats placed where needed to prevent slipping? Yes No

11. Are floor mats placed so that they will not be tripped over when they are being cleaned? Yes No

12. Is there a place to stack cases of foods so workers will not trip on them? Yes No

13. Is there a place to stack crates of produce until they can be put away? Yes No

14. Do all cupboard doors slide or have suitable catches so that the doors will stay closed?

15. Are all electric cords located so they are not a hazard for the free movement of personnel during the preparation and service of food? Yes No

16. Are all electric outlets located where water cannot be splashed or spilled on them? Yes No

17. Are greasy rags stored in a covered metal container? Yes No

18. Are matches stored in a covered metal container? Yes No

19. Are all handles on equipment placed so they cannot catch on clothing? Yes No

CLINICAL ASSIGNMENT SHEET #1

20. Are work spaces adequately lighted? Yes No
21. Does every staff member know the location of shutoffs for water, electricity, gas, and steam that supply the kitchen, in case of water leak or fire? Yes No
22. Are directions posted on the machine for the operation of all motor-driven equipment? Yes No
23. Are the stands of the machine equipment sturdy so that they will not tip over? Yes No
24. Is fixed equipment securely bolted to the floor or to the table or on a stand? Yes No
25. Is all motor-driven equipment grounded and always shut off, and operation permitted to stop, before adjustments are made or food is removed? Yes No
26. Does any gas equipment need adjusting? Yes No
27. Are pilot lights on all gas equipment operating properly and tested periodically? Yes No
28. Do all can openers cut clean? Yes No
29. Is a stepladder or step stool available in order to reach high shelves safely? Yes No
30. Is the stepladder or step stool in good repair? Yes No
31. Are there adequate first-aid supplies? Yes No
32. Are injured people sent to the nurse? Yes No
33. Is there a carbon dioxide (CO_2) fire extinguisher in the kitchen? Yes No
34. Is the fire extinguisher easily accessible but not near the range or oven? Yes No
35. Does the staff have drills on how to operate the fire extinguisher? Yes No

Safe Clothing

1. Does everyone wear medium- or low-heeled well-fitting shoes with soles that do not slip easily? Yes No
2. Do people wear noncombustible aprons that do not have long ties or loose pockets? Yes No
3. Do all staff members avoid wearing loose pins or earrings that may fall into food? Yes No
4. Do all employees avoid wearing bracelets that may catch on equipment handles? Yes No

Source: *School Food Service Journal*, Vol. 31, no. 7, July/August, 1977.

SUPERVISION OF KITCHEN SAFETY
UNIT III

CLINICAL ASSIGNMENT SHEET #2 — TRAIN EMPLOYEES IN ACCIDENT PREVENTION

NAME ____________________ SCORE __________

It is part of the food service supervisor's duties to train employees in accident prevention. This assignment sheet was designed to give you practice in accident prevention in the clinical setting.

PART I

Prepare a short class session concerning safety for all dietary employees. Use the list on the following page for ideas; then in the space below, complete your outline for the class session.

CLINICAL ASSIGNMENT SHEET #2

SAFETY A to Z

Aprons should be plain (no pockets), washable, and nonflammable

Bows, ties, and sashes are "catchers"; leave them home

Clean up food spills and litter at once

Defective equipment should be reported immediately

Empty cartons and crates should be removed promptly

Food should be kept hot or cold or not for long

Good judgment is the best accident insurance

Hot grease splatters on contact with water; cover a grease fire if possible

Instructions on all equipment should be posted in a prominent place

Jewelry is handsome at home, a hazard in the kitchen

Knives are sharp; always cut away from yourself

Ladders should be used to reach high shelves; stools are for sitting

Matches must be stored in a covered metal container

Netted hair is always neat hair

Open oven doors before lighting oven; this allows any accumulated gas to escape

Potholders should be used for protection against hot utensils

Quell "visiting" with fellow workers

Refrigerate food in shallow, covered containers

Shoes should be low heeled, closed heel and toe, well fitting, and in good repair

Turn handles inward on range

Utensils should be sanitized before storing or using again

Ventilated areas, away from food and equipment, should be used for storage of cleaning aids

Water and electricity do not mix; disconnect equipment before cleaning

X marks the grease spot you did not wipe up

Yield not to temptation; get help to lift that heavy kettle

Zany actions have no place in the kitchen

CLINICAL ASSIGNMENT SHEET #2

PART II

Using the outline you developed, conduct a training class for employees as assigned by your clinical instructor.

PART III

Develop and implement follow-up activities to evaluate the effectiveness of your training.

SUPERVISION OF KITCHEN SAFETY
UNIT III

CLINICAL ASSIGNMENT SHEET #3 — CONDUCT AN IN-SERVICE TRAINING CLASS ON FIRE SAFETY

NAME ______________________________ SCORE ____________

In-service training is an important part of the food service supervisor's duties. It should be ongoing and informative.

PART I

Plan an in-service class on fire safety. Write your lesson plan in the space provided below.

CLINICAL ASSIGNMENT SHEET #3

PART II

Using the outline you developed, conduct a training class for employees as assigned by your clinical instructor.

Part III

Develop and use follow-up activities to evaluate the effectiveness of your training.

EXAMPLE: Interrupt your employees at an unexpected time on a regular workday. Present them with a situation such as a grease fire on the grill, and ask them to enact what they would do.

SUPERVISION OF KITCHEN SAFETY
UNIT III

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

SUPERVISION OF KITCHEN SAFETY
UNIT III

TEST

NAME ______________________________________ SCORE ________________

1. Match to their correct definitions terms associated with supervision of kitchen safety. Write the correct numbers in the blanks.

______a. Legislation passed in 1970 that mandates standards for a safe and healthy work environment for every working man and woman in the nation

______b. Volume of sound as measured in decibels and exposure time for the receiver

______c. Committee with representation from every department to formulate and enforce policies and procedures concerning safety in the institution

1. Safety committee
2. Occupational Safety and Health Act (OSHA)
3. Noise level

2. Distinguish between supervisor's and employee's responsibilities for kitchen safety. Write an "S" in the blanks before supervisor's responsibilities and an "E" in the blanks before employee's responsibilities.

______a. Coming to work in good health

______b. Keeping safety records

______c. Knowing and following safety rules for the job

______d. Providing safety training

______e. Coming to work relaxed

______f. Posting safety reminders

______g. Investigating, analyzing, and preventing accidents

______h. Knowing what to do in an emergency

______i. Setting up inspection routines to identify potential problems

______j. Controlling emotions such as anger, fear, worry, depression

______k. Motivating employees to be safety conscious

TEST

3. State purposes of the Occupational Safety and Health Act (OSHA).

a. ____

____

b. ____

____

4. Distinguish between employer's and employee's responsibilities to the OSHA. Write an "R" in the blanks before employer's responsibilities and an "E" in the blanks before employee's responsibilities.

______a. Taking personal responsibility for safe actions and conduct

______b. Posting the Occupational Safety and Health Act

______c. Posting a list of emergency phone numbers

______d. Complying with the OSHA rules and regulations

______e. Ensuring each employee a place of employment free from recognized hazards that cause or are likely to cause death or serious physical harm

______f. Complying with occupational safety and health standards created by the OSHA

______g. Informing employees of the rules and regulations affecting them

5. Select from the following list basic OSHA regulations regarding food service. Write an "X" in the blank before each correct answer.

______a. Dietary department should provide a safe environment

______b. Dietary department exits must be clearly marked and provide free access

______c. Dietary department does not need a planned training program; employees should learn on the job

______d. Dietary department personnel should include someone trained in first aid, and first-aid supplies should be readily available

______e. Dietary department should have a planned safety training program

______f. Dietary department should check booster heaters and steam equipment only when there is a problem

______g. Noise levels in dietary department should be checked if considered to be too high

TEST

______h. Dietary department should replace all handrails on stairs

______i. All equipment in the dietary department should be maintained in safe working order

______j. Dietary department must have exits sufficient in number for prompt escape in case of fire or other emergencies

______k. Dietary department personnel should use protective eye and face equipment when there is possibility of injury that could be prevented

6. Select from the following list poor safety attitudes/actions. Write an "X" in the blank before each correct answer.

______a. Ill temper

______b. Carefulness

______c. Showing off

______d. "Clowning" on the job

______e. Thoroughness

______f. Recklessness

______g. Common sense

______h. Laziness

______i. Ignorance

______j. Unwillingness to recognize importance of safety

______k. Overconfidence

7. Select from the following list reasons for keeping accident records. Write an "X" in the blank before each correct answer.

______a. To identify accident-prone employees

______b. To provide information on number and kind of accidents

______c. To make it unnecessary to have a safety committee

______d. To create new methods or procedures for avoiding accidents

______e. To make the food service supervisor look efficient

______f. To identify safety training needs

TEST

8. Select from the following list points to remember about safety reports. Write an "X" in the blank before each correct answer.

______a. Records must be maintained for OSHA

______b. Facility should use health department reporting form

______c. Reports should be read by the administrator

______d. Reports should be studied by the safety committee

______e. Reports should be completed by the employee

______f. Records should be kept for serious mishaps only

9. State five fire safety rules.

a. ____

b. ____

c. ____

d. ____

e. ____

(NOTE: Test questions 10-13 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

10. Complete an incident report.

11. Complete a safety checklist for the dietary department.

12. Train employees in accident prevention.

13. Conduct an in-service training class on fire safety.

SUPERVISION OF KITCHEN SAFETY
UNIT III

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 559. The point total for questions 1-9 is 159; the point total for questions 10-13 is 400.)

1. (6 points)

   a. 2

   b. 3

   c. 1

2. (33 points)

   a. E

   b. S

   c. E

   d. S

   e. E

   f. S

   g. S

   h. E

   i. S

   j. E

   k. S

3. (6 points)

   a. Preserving human resources by assuring every working man and woman in the nation safe and healthful working conditions

   b. Creating standards for a safe and healthy work environment

4. (21 points)

   a. E

   b. R

   c. R

   d. E

   e. R

   f. R

   g. R

5. (22 points)

   a, b, d, e, g, i, j, k

ANSWERS TO TEST

6. (22 points)

   a, c, d, f, h, i, j, k

7. (12 points)

   b, d, f

8. (12 points)

   a, c, d

9. (25 points)

   Answer should include any five of the following

   a. Report any fire immediately

   b. Know where fire extinguishers are, and know how to use them

   c. Keep equipment clean to prevent fires caused by grease buildup, especially on vent hoods and filters

   d. Never put water on hot grease or grease fires

   e. Keep matches in closed container

   f. Smoke in designated areas only

   g. Report any gas leaks

   h. Turn off open fires when not in use

10. Evaluated to the satisfaction of the class instructor (50 points)

11. Evaluated to the satisfaction of the clinical instructor (50 points)

12. Evaluated to the satisfaction of the clinical instructor (150 points)

13. Evaluated to the satisfaction of the clinical instructor (150 points)

MENU PLANNING
UNIT I

UNIT OBJECTIVE

After completing this unit, the student should be able to plan nutritionally adequate menus that are acceptable to the majority of patients on both general and therapeutic diets. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with menu planning to their correct definitions.
2. State major goals of institutional food service.
3. List factors that determine type of food service in a health care facility.
4. State basic considerations in menu planning.
5. List techniques used to produce variety in menus.
6. Select from a list the mechanics of menu planning.
7. Arrange in order the steps for nonselective menu item selection.
8. Describe possible food combinations for the three-meals-per-day plan.
9. List characteristics of a production menu.
10. Select from a list common mistakes in menu planning.
11. Select from a list factors to consider in making menu substitutions.
12. Use checklist for nutritional adequacy to find errors in menu planning of sample menu.
13. Practice planning a general menu for one day.
14. Practice planning routine modified-diet menus.
15. Use a checklist to evaluate menu characteristics.
16. Plan a week's menu for your facility.
17. Plan routine modified-diet menus for your facility.
18. Evaluate menu substitutions.

MENU PLANNING
UNIT I

SUGGESTED ACTIVITIES

I. Suggested activities

A. Order materials to supplement unit.

1. Manuals

a. *Menu Planning/Merchandising* by William Kahri, 1978. MP 279. Available from National Restaurant Association, One IBM Plaza, Suite 2600, Chicago, Illinois 60611.

(NOTE: This illustrated manual provides a road map to evaluate and design the best menu-merchandising for your operation. Covering everything from customer profile to competition, this is your guide to intelligent menu planning.)

b. *Nutritive Value of Foods,* Home and Garden Bulletin #72, United States Department of Agriculture, 1981. Available from U.S. Government Printing Office, Washington, D.C. 20402.

2. Filmstrip (35 mm color) and audio cassettes

a. *Planning to Eat? A Guide to Saving Time, Money, and Energy.* Color, 13 minutes, 1980. Available from Tupperware Home Parties, Educational Services, P.O. Box 2353, Orlando, Florida 32802.

(NOTE: This kit is a menu-to-meal learning experience. Participants will learn to plan appealing and nutritious meals. The filmstrip also gives tips on labeling, unit pricing, and comparison shopping.)

b. *Low-Cost Protein and Menu Planning* by L. W. Hamilton, and B. Vidunas, 1974. U. Ed 4-423 15M374. Available from USDA Cooperative Extension Service, Pennsylvania State University, 323 Agricultural Administration Building, University Park, Pennsylvania 16802.

c. *Vegetables for Variety* by L. W. Hamilton, and B. Vidunas, 1974. U. Ed 5-146 15M1074. Available from USDA Cooperative Extension Service, Pennsylvania State University, 323 Agricultural Administration Building, University Park, Pennsylvania 16802.

3. Booklets

(NOTE: The following booklets are available from General Mills, Inc., Nutrition Department, Dept. 45, P.O. Box 1112, Minneapolis, Minnesota 55440.)

a. *Nutrition: An Essential for Health*

(NOTE: This booklet discusses meal planning the nutritious way, using the basic food groups to balance nutritional needs of family members.)

SUGGESTED ACTIVITIES

b. *Meal Planning for the Golden Years*

(NOTE: This booklet describes the importance of good nutrition for older adults. It offers hints for planning appetizing meals with foods that are nutritious, varied, and easy to prepare.)

c. *Meal Planning for Diabetics*

(NOTE: This brochure for patient use is based on the *Exchange List for Meal Planning* booklet.)

d. *Planning a Sodium-Controlled Diet*

(NOTE: This booklet describes a sodium-restricted diet of approximately 500 milligrams sodium. It is designed for patient use.)

B. Make transparencies.

(NOTE: Color TM #2 and TM #3 appropriately.)

C. Provide students with objective sheet.

D. Discuss unit and specific objectives.

E. Provide students with information and assignment sheets.

F. Discuss information and assignment sheets.

G. Develop appropriate learning activities for special needs students.

H. Demonstrate the many shapes in which a carrot may be cut. Discuss the value of contrast in shape.

I. Have students discuss their favorite garnishes. Make a list of these ideas to type, reproduce, and distribute to each class member at the next meeting.

J. Discuss with the class the importance of contrast in color.

EXAMPLES: Rosy pear salad, food coloring in angel food cake and/or applesauce, parsley in boiled potatoes

K. Have students bring their favorite menu planning ideas to class. Allow ample time for sharing ideas.

L. Have students visit a facility with the five-meal-per-day plan. Discuss advantages and disadvantages with class.

SUGGESTED ACTIVITIES

M. To demonstrate the variety of familiar and/or acceptable foods, have students raise hands when you call out the name of a food regularly served in their facility.

EXAMPLES: Grits, sweet potatoes, corn fritters, chicken croquettes

N. Have students write the usual menu patterns for their facilities. How many serve the main meal at noon? How many serve the main meal in the evening?

O. Have students bring examples of menu planning information the lay public might use.

EXAMPLES: Safeway's Nutrition Awareness Program (SNAP),
County extension bulletins

P. Give test.

Q. Reteach if necessary.

II. Instructional materials

- A. Objective sheet
- B. Suggested activities
- C. Information sheet
- D. Transparency masters
    1. Transparency Master #1 — How the Patient Views Hospital Food
    2. Transparency Master #2 — Good and Poor Colors for Food
    3. Transparency Master #3 — Sample Classification by Color
    4. Transparency Master #4 — Sample Classification by Season
    5. Transparency Master #5 — Sample Tally System for Repetition of Food Items
    6. Transparency Master #6 — Sample Production Menu
- E. Class assignment sheets
    1. Class Assignment Sheet #1 — Use Checklist for Nutritional Adequacy to Find Errors in Menu Planning of Sample Menu
    2. Class Assignment Sheet #2 — Practice Planning a General Menu for One Day

SUGGESTED ACTIVITIES

    3. Class Assignment Sheet #3 — Practice Planning Routine Modified-Diet Menus

F. Answers to class assignment sheets

G. Clinical assignment sheets

    1. Clinical Assignment Sheet #1 — Use a Checklist to Evaluate Menu Characteristics

    2. Clinical Assignment Sheet #2 — Plan a Week's Menu for Your Facility

    3. Clinical Assignment Sheet #3 — Plan Routine Modified-Diet Menus for Your Facility

    4. Clinical Assignment Sheet #4 — Evaluate Menu Substitutions

H. Answers to clinical assignment sheets

I. Test

J. Answers to test

III. Unit references

A. Barker, Ellen H. "Food Preparation Seminar: Nutrition Training." Photocopied, Moore-Norman Area Vocational Technical School, 1981.

B. Eckstein, Eleanor. *Menu Planning*, 2nd ed. Westport, Connecticut: AVI Publishing Company, Inc., 1978.

C. Mahaffey, Mary J., et al. *Food Service Manual for Health Care Institutions.* Chicago, Illinois: American Hospital Association, 1981.

D. Stokes, Judy Ford. *Cost Effective Quality Food Service.* Germantown, Maryland: Aspen Systems Corporation, 1979.

E. West, B. B., et al. *Food Service in Institutions*, 5th ed. New York: John Wiley and Sons, Inc., 1977.

MENU PLANNING
UNIT I

INFORMATION SHEET

I. Terms and Definitions

A. Entree — Main course of a meal

B. Food habits — Practices and attitudes that predetermine what, when, and how a person will eat

C. Food preference — Familiar foods that are consumed regularly

(NOTE: Most people will rate unfamiliar foods they have never tasted as "foods I dislike." A new menu item must be tried approximately three times before it is regarded as familiar and not foreign.)

D. KIND — Food group determined on the basis of a common characteristic

EXAMPLES: An apple is a KIND of fruit; a zucchini is a KIND of vegetable.

E. Menu planning — An art that determines which food items are to be served and when they are to be served

(NOTE: Menu planning is a complex challenge that requires the menu planner to consider the needs of diverse ethnic groups while providing maximum utilization of labor and equipment.)

F. Nonselective menu — Plan of foods that provides one item per meal component

(NOTE: The nonselective menu is also called a *set menu*. A well-balanced set menu is difficult to plan because its nutritional adequacy rests on the assumption that all foods will be eaten in the desired quantities. The nonselective menu is planned to include foods that are universally accepted, which can lead to monotony. However, food and labor costs can be lowered 15 percent from that of a selective menu.)

G. Selective menu — Plan of foods that allows choices among several food items offered

(NOTE: The selective menu is preferred in institutions because it is more flexible and involves an interaction between patient and food service personnel. Control of nutrient intake is decreased because patients choose what they like and not what they need for good nutrition.)

H. Satiety — State of being full and/or satisfied

(NOTE: Protein and fat in each meal increase satiety and reduce hunger between meals.)

INFORMATION SHEET

I. Variety — Absence of monotony or sameness

J. Vendor — Salesperson; representative of food and/or supply company

II. Major goals of institutional food service (Transparency #1)

A. Providing the best possible food

EXAMPLES: Provide nutritious, wholesome, palatable, well-prepared food under sanitary conditions.

B. Serving food attractively

C. Maintaining costs within budget

III. Factors that determine type of food service in a health care facility

A. Number of meals served per day

EXAMPLES: Three per day, five per day

B. Number of food items offered on menu at each meal

(NOTE: Enough items should be offered to provide satiety.)

C. Time meals are served

D. Type of menu

EXAMPLES: Selective, nonselective

(NOTE: In some short-term care hospitals, menus resemble that of a restaurant in variety of selections. These facilities use the cook/chill system and/or convenience foods in addition to items prepared in the hospital. There is greater patient satisfaction in these facilities.)

IV. Basic considerations in menu planning (Class Assignment Sheets #1-#3; Clinical Assignment Sheets #2-#4)

A. Nutritional needs of individuals being served

EXAMPLES: Needs of the elderly or persons with diabetes

(NOTE: Include recommended amounts of foods from Daily Food Guide. Make adjustments for specific health needs. If any substitutions are made in the menu, they must be nutritionally equivalent to the original menu item.)

INFORMATION SHEET

B. Food habits

(NOTE: Consider the psychological and cultural meanings of food.)

EXAMPLES: Food is used to express love and concern; religious belief affects food intake; nationality may influence food preferences.

C. Food costs and budget

EXAMPLE: Obtaining prices from more than one vendor

(NOTE: Make use of seasonal foods and use comparative pricing.)

D. Equipment available

E. Number of employees and their skills

F. Variety

(NOTE: Monotony in food choices on the menu causes lowered acceptance. Use garnishes, sauces, and contrasts to add diversity to food items.)

V. Techniques used to produce variety in menus (Clinical Assignment Sheet #1)

(NOTE: Variety enhances appetite appeal.)

A. Controlled repetition of KIND

EXAMPLE: Apple juice on Monday; apple cobbler on Tuesday; Waldorf salad on Wednesday

(NOTE: Controlled repetition prevents repeating the same food too often. Do not repeat same food in same meal.)

EXAMPLE: Do not serve spaghetti with a meat sauce containing tomatoes in the same meal with a mixed green salad containing tomatoes.

B. Contrast in color (Transparency #2)

(NOTE: Interesting but harmonious color combinations are important in merchandizing food and in stimulating appetite. Remember, *the eye eats first*, and colorful foods always "sell" better.)

INFORMATION SHEET

C. Contrast in texture and/or consistency

EXAMPLES: Hard, soft; brittle, chewy; grainy, gummy; sticky, crunchy; smooth, crisp

(NOTE: *Texture* and *consistency* refer to the way foods feel in the mouth. Too little texture is boring; too much texture causes rejection of food.)

D. Contrast in shape

EXAMPLES: Slices, squares, balls

(NOTE: Attractive meals harmonize color, texture, and shape.)

E. Contrast in temperature

(NOTE: Include something hot and something cold at each meal.)

F. Contrast in flavor

EXAMPLE: Bland versus spicy

(NOTE: There are four major tastes that we can distinguish: bitter, salty, sour, and sweet. If food is flavorful, it is more likely to be eaten.)

G. Preparation methods

(NOTE: Avoid using the same preparation method for all foods on the menu.)

EXAMPLES: Avoid all fried foods or all mixtures.

VI. Mechanics of menu planning (Transparencies #3-#5)

(NOTE: Computers are being used very successfully for menu planning.)

A. Arrange work area with idea generators

EXAMPLE: Have available recipes, cookbooks, magazines, previous menus, classification tables by color or season.

(NOTE: The work area must be free of distractions.)

B. Plan foods that are familiar, customary, and acceptable

(NOTE: Because food preferences are highly variable among individuals, planning can be done only in a general way.)

INFORMATION SHEET

C. Develop a system for keeping track of repetition

(NOTE: Decide the minimum and/or maximum number of days that must elapse before an item can be served again.)

D. Consider delivery schedules for raw food items

(NOTE: Menu items cannot be prepared unless all ingredients are on hand.)

E. Use systematic order of item selection

(NOTE: Begin with entrees and distribute them throughout the cycle; then distribute starchy foods, and so forth.)

EXAMPLE:

Meal	**Sunday**	**Monday**	**Tuesday**	**Wednesday**	**Thursday**	**Friday**	**Saturday**
Lunch	Sliced Beef	Cubed Chicken	Ground Beef	Pork Chop	Fish Fillet	Cheese	Sliced Ham
Supper	Tuna	Wieners	Sliced Liver	Diced Turkey	Eggs	Beef Chunks	Cold Cuts
Lunch	Chicken pieces	Cube Steak	Fish	Whole Chicken	Cottage Cheese	Ground Beef	Cubed Chicken
Supper	Meat Salad	Diced Pork	Sliced Beef	Variety Meat	Sliced Pork	Salmon & Mackerel	Beef Steak
Lunch	Sliced Ham	Chicken Livers	Pork Chop	Eggs	Lamb	Fish	Whole Chicken
Supper	Cold Cuts	Diced Beef	Sliced Turkey	Ground Beef	Cheese	Cube Steak	Diced Pork

VII. Nonselective menu item selection

A. Distribute the dinner and lunch entrees over the cycle

(NOTE: Vary the type and preparation method.)

B. Select a starchy food, if necessary, to accompany each entree

C. Select a vegetable to accompany each entree

(NOTE: Remember to plan contrasts in color, texture, and shape.)

D. Select lunch and dinner salads

(NOTE: Vary the salad type throughout the cycle.)

E. Select lunch and dinner desserts

(NOTE: Vary the dessert type throughout the cycle.)

F. Select soups, if any

INFORMATION SHEET

G. Select lunch and dinner breads

H. Select breakfast entrees

I. Select breakfast cereals and/or breads

J. Select breakfast fruit and/or juice

K. Have a menu review committee make final adjustments and refinements

(NOTE: Check again for nutritional adequacy, repetition, variety, appeal to customers, cost, and production problems. Remember that the beginning and end of the cycle must fit together.)

VIII. Possible food combinations for the three-meals-per-day plan

(NOTE: Combinations vary from region to region and facility to facility.)

A. Breakfast

(NOTE: Breakfast meal patterns include, but are not limited to, the following items.)

1. Fruit or juice, eggs with or without meat, bread item, beverage
2. Fruit or juice, cereal and milk, beverage
3. Bread items, beverage

B. Lunch

(NOTE: Lunch meal patterns include, but are not limited to, the following items.)

1. Soup, sandwich, dessert, beverage
2. Salad plate, bread item, dessert, beverage
3. Casserole, bread item, dessert, beverage
4. Sandwich, salad, dessert, beverage

C. Dinner or supper

(NOTE: Dinner meal patterns include, but are not limited to, the following items.)

1. Appetizer or soup, entree, starchy food, vegetable, salad, bread item, dessert, beverage
2. Entree, two vegetables, salad, dessert, beverage

INFORMATION SHEET

3. Casserole, vegetable, salad, bread item, dessert, beverage

IX. Characteristics of a production menu (Transparency #6)

- A. Prepared for food service employees
- B. Tells recipes to use
- C. Indicates ingredients of selected food items

  EXAMPLE: For fruit cup, use fresh apple, fruit cocktail, and marshmallows.

- D. Predicts servings needed
- E. Indicates portion size

X. Common mistakes in menu planning

- A. Ignoring nutritional adequacy
- B. Incorporating personal preferences and biases into menus
- C. Failing to visualize meal on plate

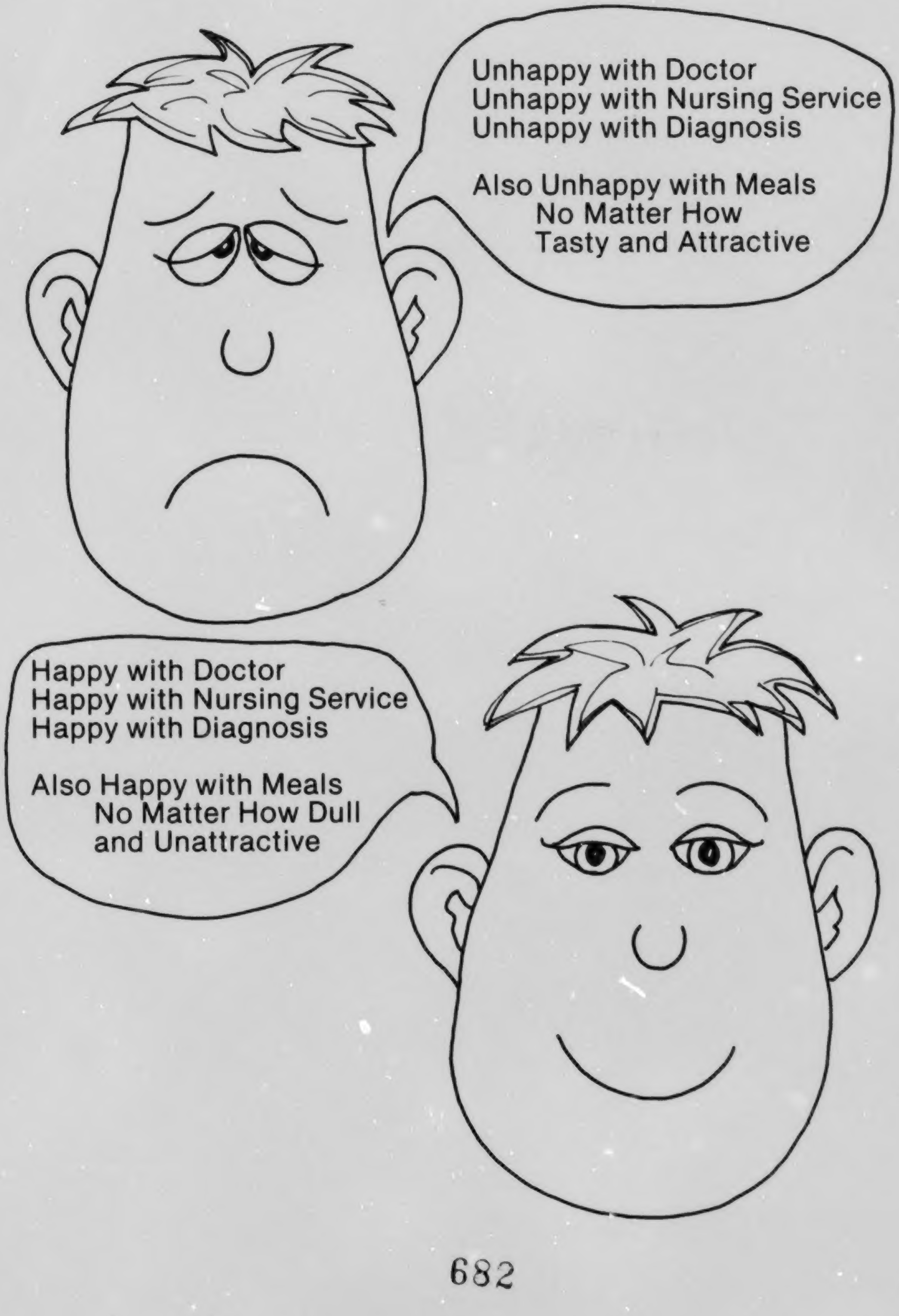
  (NOTE: This procedure will help eliminate same color, same shape.)

- D. Ignoring customer preferences and food habits
- E. Continuing to prepare unpopular items
- F. Failing to cost menus
- G. Ignoring production problems
- H. Settling for sameness

XI. Factors to consider in making menu substitutions

- A. Nutrient content
- B. Color
- C. Taste
- D. Texture
- E. Cost
- F. Variety

How the Patient Views Hospital Food


Unhappy with Doctor
Unhappy with Nursing Service
Unhappy with Diagnosis

Also Unhappy with Meals
No Matter How
Tasty and Attractive

Happy with Doctor
Happy with Nursing Service
Happy with Diagnosis

Also Happy with Meals
No Matter How Dull
and Unattractive

Good and Poor Colors for Food

Good Colors for Food

Red
Red Orange
Peach
Pink
Tan
Brown
"Butter" Yellow
Light Green

Poor Colors for Food

Purple
Violet
Yellow-Green
Orange-Green
Gray
Olive
"Mustard" Yellow

Sample Classification by Color

Salads

Red

Cherry Marshmallow Gelatin

Strawberry Gelatin

Cranberry Relish

Orange

Mandarin Orange and Marshmallow

Fruited Orange Gelatin

Citrus Sections

Green

Pear and Lime Gelatin

Cottage Cheese and Lime Gelatin

Pineapple and Cucumber in Lime Gelatin

Yellow

Waldorf Salad in Lemon Gelatin

Pineapple and Cottage Cheese in Gelatin

Bananas in Lemon Gelatin

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Sample Classification by Season

Spring		Summer
	Pies	
Pineapple Pie		Banana Cream Pie
Apricot Cream Pie		Lime Chiffon Pie
Berry Pie		Peach Pie
	Fresh Fruit	
Strawberries		Green Grapes
Pineapple		Melons
Nectarines		Peaches

Fall		Winter
	Pies	
Pumpkin Pie		Frozen Pies
Apple Pie		Mincemeat Pie
Custard Pies		Pecan Pie
	Fresh Fruit	
Apples		Cranberries
Oranges		Bananas
Tokay Grapes		Pears

Sample Tally System for Repetition of Food Items

Food Item	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Apples							
Cheese							
Chocolate							
Tomatoes							
Beef							

Sample Production Menu

Menu Item	Description	Portion Size	No. of Servings
Baked Chicken	Frozen Pieces	3 oz	100
Mashed Potatoes	Fresh	½ c	100
Gravy	Cream	2 oz	100
Fruit Salad	1 pear half, ¼ c peach slices, 1 spiced crab-apple ring on lettuce leaf with 1 T honey dressing		80
Honey Dressing	Recipe #25	1 T	80
Whole-Wheat Roll	Recipe #130	1	120
Gingerbread	General Mills	1	100
Whipped Topping	Frozen	2 oz	100

TM #6

FSS - 25-D

MENU PLANNING
UNIT I

CLASS ASSIGNMENT SHEET #1 — USE CHECKLIST FOR NUTRITIONAL ADEQUACY TO FIND ERRORS IN MENU PLANNING OF SAMPLE MENU

NAME ______________________________ SCORE ______________

It is very important to evaluate the nutritional adequacy of menus. This exercise is designed to give practice in one method of evaluating the nutritional adequacy of a menu.

Use the following sample menu to complete this assignment sheet.

SAMPLE MENU

SUNDAY	MONDAY	TUESDAY	WEDNESDAY
Orange juice Cornflakes Poached egg Toast/margarine Milk/coffee	Apple juice Cream of Wheat Pancakes Margarine Syrup Bacon Milk/coffee	Orange juice Wheat Chex Scrambled egg and ham Toast/margarine Milk/coffee	Grape juice Oatmeal French toast Margarine/syrup Link sausage Milk/coffee
Roast beef Mashed potatoes Gravy Bu. carrots Tossed salad w/ Fr. dressing Hot roll/margarine Vanilla ice cream Coffee/tea	Chicken & noodles Bu. frozen peas Cherry gelatin salad w/bananas Bread/margarine Ambrosia Milk/coffee	Salisbury steak Baked potato Bu. diced carrots Cole slaw Bread/margarine Custard Milk/coffee	Bk. pork chops Dressing and gravy Bu. cauliflower Spiced apple ring salad Bread/margarine Brownie Coffee/tea
Cr. of potato soup Crackers Tuna salad sandwich Mixed fruit salad Chocolate pudding w/whipped topping Milk/coffee/tea	BBQ wieners Scalloped potatoes Bu. spinach Celery salad Bread/margarine Angel food cake Strawberries Coffee/tea	Chicken noodle soup Crackers Bologna sandwich Lettuce wedge salad w/1000 island dressing Diced peaches and red grapes Coffee/tea	Turkey pot pie Bu. broccoli Orange & grapefruit section salad Whipped gelatin Coffee/tea

CLASS ASSIGNMENT SHEET #1

THURSDAY	FRIDAY	SATURDAY
Grapefruit juice Cheerios Fried egg Bacon Toast/margarine Milk/coffee	Orange juice Malt-O-Meal Poached egg Biscuit Margarine Milk/coffee	Pineapple juice 40% Bran Flakes Waffles Margarine/syrup Sausage patty Milk/coffee
Braised liver and onions Buttered corn Bu. green beans Peach & cottage cheese salad Lime sherbet Coffee/tea	Fried perch Tater Tots Bu. frozen peas Carrot and raisin salad Bread/margarine Fudge pudding cake Coffee/tea	Baked ham Bk. sweet potato Bu. green beans Garden slaw salad Corn bread/margarine Cherry crisp Coffee/tea
Vegetable soup Crackers Egg salad sandwich Lime gelatin w/pear salad Sliced banana Cranberry juice Milk/coffee/tea	Macaroni & cheese Bu. broccoli Deviled egg salad Bread/margarine Fresh fruit cup Milk/coffee/tea	Hamburger on bun French fries Sliced tomato Onion/pickle Apple pie Milk/coffee/tea

FSS - 29-D

CLASS ASSIGNMENT SHEET #1

MENU PLANNING CHECK LIST FOR NUTRITIONAL ADEQUACY

PART I

Complete the following checklist as one method of evaluating the nutritional adequacy of the sample menu.)

	S	M	T	W	T	F	S	Total
VEGETABLES AND FRUITS								
A. *Dark green or deep yellow vegetable or fruit or equivalent sources (e.g., liver) of vitamin A* — 4 or more servings per week 1 serving is equivalent to 1/2 cup broccoli, chard, collards, cress, kale, spinach, turnip greens, or other dark green leaves, carrots, pumpkin, sweet potato, winter squash or five apricot halves or 1/2 medium cantaloupe								
B. *Citrus fruit or equivalent sources of vitamin C* — 1 serving per day (NOTE: Vitamin C cannot be stored; it must be in diet every day.) 1 serving is equivalent to 1/2 grapefruit, 1 medium orange, 1/2 cantaloupe, 1/2 cup strawberries or 1/2 cup orange, grapefruit or blended orange and grapefruit juice 1/2 serving is equivalent to 1 wedge honeydew, 1 tangerine or 1/2 cup tangerine juice, 1/2 cup tomato juice or cooked tomato, 1 medium raw tomato, 1/2 cup broccoli, brussels sprouts, raw cabbage, collards, kale, mustard greens, spinach or turnip greens								
C. *Potato and other vegetables and fruits* — 2 to 3 servings daily to make a total of four servings with the above fruits and vegetables (NOTE: These foods should be distributed throughout the three meals.) 1 serving is equivalent to 1/2 cup of vegetable or fruit, or a usual serving such as one medium apple, banana, peach, or potato								

CLASS ASSIGNMENT SHEET #1

	S	M	T	W	T	F	S	Total
MILK								
D. *Fluid whole milk, skim milk, buttermilk, or equivalent* — 2 cups daily for adults, 4 cups daily for children								
1 cup milk is equivalent to $1\frac{1}{3}$ ounces of cheddar cheese, $1\frac{1}{3}$ cups cottage cheese, $1\frac{1}{2}$ cup of ice cream								
MEAT AND OTHER PROTEIN FOODS								
E. *Meat, poultry, fish, or protein equivalent* — 5 ounces (cooked weight) per day used in the dinner and supper								
1 ounce is equivalent to 1 ounce of lean beef, veal, lamb, pork, poultry, fish, seafood or variety meats such as liver, heart, or kidney; 1 frankfurter; 1 thick slice luncheon meat; 1 thick slice of cheese; $\frac{1}{4}$ cup cottage cheese; $\frac{1}{2}$ cup dried beans or dried peas; 2 tablespoons peanut butter; 1 egg (NOTE: If serving of cheddar or cottage cheese is being counted as a milk equivalent, it should not be counted as a meat equivalent.)								
EGGS								
F. 4 or more per week								
BREAD AND CEREALS								
G. *Bread and cereals, whole grained or enriched* — 4 or more servings per day								
1 serving is equivalent to 1 slice of bread; 1 roll, muffin, or biscuit; 1 ounce ready-to-eat cereal; $\frac{1}{2}$ to $\frac{3}{4}$ cup cooked cereal, cornmeal, grits, rice, macaroni, noodles or spaghetti								
OTHER FOODS								
H. *Butter or fortified margarine* — 3 or more teaspoons per day used as a spread or in cooking								

I. Is there meat or other protein food in each dinner and supper?____________________

J. Is there at least one serving of a fruit and/or vegetable in each meal?____________________

CLASS ASSIGNMENT SHEET #1

K. Is there a good source of fiber at each meal?____________________

If not, which meals lack fiber?____________________

Institution ____________________

Dates of Menus ____________________

Date checked __________ By __________

Oklahoma State Department of Health

CLASS ASSIGNMENT SHEET #1

PART II

List food sources of vitamin A and vitamin C and record errors for each day of the sample menu.

Nutrients	Sun	Mon	Tues	Wed	Thur	Fri	Sat
Vitamin A sources (list foods)							
Vitamin C sources (list foods)							
Potato and other fruit/vegetable							
Milk							
Meat and other protein foods							
Eggs							
Breads and cereal							
Other foods							
Good variety							
Contrast in color							
Contrast in texture							
Contrast in flavor							
Contrast in form/shape							
Contrast in temperature							
Contrast in method of preparation							
Repetition of food KIND							
Fiber							

MENU PLANNING
UNIT I

CLASS ASSIGNMENT SHEET #2 — PRACTICE PLANNING A GENERAL MENU FOR ONE DAY

NAME ______________________________ SCORE ______________

The menu for the general diet is the basis for all therapeutic diets. The general diet is sometimes referred to as the normal diet, regular diet, or house diet.

The following menu planning form provides a pattern that includes the Daily Food Guide. Use this form to plan a general menu for one day.

MENU PLANNING FORM

BREAKFAST	GENERAL DIET MENU
Fruit or juice	
Cereal	
Egg or meat alternate	
Bread	
Fat	
Milk/beverage	
LUNCH or DINNER	
Main dish, including protein EXAMPLE: Meat, meat alternate, *or* soup and sandwich	
Vegetables, cooked and/or raw	
Bread	
Fat	
Fruit or dessert	
Milk/beverage	
SUPPER or MAIN MEAL	
Soup or juice, if desired	
Meat, fish, poultry, or alternate	
Potato or substitute	
Vegetables, cooked and/or raw	
Bread	
Fat	
Fruit or dessert	
Milk/beverage	

MENU PLANNING
UNIT I

CLASS ASSIGNMENT SHEET #3 — PRACTICE PLANNING ROUTINE MODIFIED-DIET MENUS

NAME ____________________ SCORE ____________

Use the general menu you planned in Class Assignment Sheet #2 as the basis for the menus for three routine modified diets. Use the following form to plan one day's menu for a 1,800-calorie diabetic diet, a high-fiber diet, and a low-cholesterol, low-sodium diet.

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CLASS ASSIGNMENT SHEET #3

General Diet Menu	1,800 Calories	High-Fiber Diet	Low-Cholesterol, Low-Sodium Diet
BREAKFAST			
LUNCH			
SUPPER			
SNACKS			

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MENU PLANNING
UNIT I

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

PART I

	S	M	T	W	T	F	S	total
A.	1	1	1	1	0	1 1/2	1	6 1/2
B.	1	2	1 1/2	1	1	1	1	8 1/2
C.	4	4	3	3	6	3	4	27
D.	2 3/4	2	2 1/3	1	2	2	2	14
E.	2	2	2	2	2	1 1/2	2	13 1/2
F.	1	0	1	1/2	2	2	0	6 1/2
G.	5	5	4	4	5	5	5	33
H.	3	5	3	4	3	5	3	26

I. Yes

J. Yes

K. No; Thursday and Friday

ANSWERS TO CLASS ASSIGNMENT SHEETS

PART II

Nutrients	Sun	Mon	Tue	Wed	Thur	Fri	Sat
Vitamin A sources (list foods)	Carrots	Spinach	Carrots	Broccoli		Carrot, broccoli	Sweet potato
Vitamin C sources (list foods)	Orange juice	Ambrosia, strawberries	Orange juice, cole slaw	Orange & grapefruit sections	Grapefruit juice	Orange juice, slaw	Sliced tomato
Potato and other fruit/vegetable	Potatoes lunch & supper						
Milk	Ice cream (1/4), potato soup (1/2)		Custard (1/2)	Add milk to lunch or supper			
Meat and other protein foods						Check amount of protein in macaroni & cheese	
Eggs				French toast (1/2 egg)	Eggs at breakfast and supper	Eggs at breakfast and supper	
Breads and cereal							
Other foods							
Good variety	Potatoes repeated				Three fruits at supper; eggs repeated	Eggs repeated	
Contrast in color			Peaches & green grapes	Add green to lunch			
Contrast in texture				Add texture to lunch	Add texture to lunch		
Contrast in flavor							
Contrast in form/shape							
Contrast in temperature							
Contrast in method of preparation							
Repetition of food KIND	See potatoes				Lime sherbet, lime gelatin; see eggs	See eggs	
Fiber					Add fiber to supper	Add fiber to breakfast	

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #2 — Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #3 — Evaluated to the satisfaction of the class instructor

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MENU PLANNING
UNIT I

CLINICAL ASSIGNMENT SHEET #1 — USE A CHECKLIST TO EVALUATE MENU CHARACTERISTICS

NAME ______________________________ SCORE ______________

Menu planning requires the consideration of many diverse areas. Once you get a menu on paper, you need to evaluate it for the following characteristics.

PART I

Take a menu for one day from your facility and use this checklist to evaluate it.

		Yes	**No**
A.	Is the menu suitable to the majority of patients?	☐	☐
B.	Are the foods planned according to the majority's eating habits?	☐	☐
C.	Has the nutritional adequacy been checked by comparing menu to the Daily Food Guide?	☐	☐
D.	Has the climate and season of the year been considered?	☐	☐
E.	Does the menu have variety?	☐	☐
	(NOTE: Check for contrast in flavor, color, form and/or shape, temperature, texture and/or consistency, and methods of preparation. Also check for repetition of food KIND.)		
F.	Is the menu planned for good distribution of labor required?	☐	☐
G.	In planning for use of equipment, is there enough oven space?	☐	☐
	1. Can you coordinate temperatures?	☐	☐
	2. Is there enough refrigeration, such as room to defrost meats?	☐	☐
	3. Is there enough range-top space?	☐	☐
	4. Is there planned use of other equipment such as mixer and/or blender?	☐	☐
	5. Are there correct cooking/serving containers and utensils?	☐	☐

CLINICAL ASSIGNMENT SHEET #1

Yes **No**

H. Is the cost within budget? ☐ ☐

What portion size will be used and what does each portion cost? ____________

____

1. What foods are in season and are the most economical to use? ____________

____

2. What convenience foods are within budget restrictions? ____________

____

3. What carry-over foods could be incorporated into menu? ____________

____

I. Are delivery schedules considered? ☐ ☐

1. Will the food items needed be available in time for preparation? ____________

____

2. What storage space is available? ____________

____

3. How much do we need? ____________

J. Does department have recipes available? ☐ ☐

1. Are correct portions indicated on recipe? ____________

____

2. Are recipes costed? ____________

____

K. Is there a new recipe included on this cycle? ☐ ☐

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CLINICAL ASSIGNMENT SHEET #1

		Yes	No
L.	Is there a special event or holiday during this time period?	☐	☐
M.	Can this menu be easily modified for therapeutic diets without an excessive amount of additional labor?	☐	☐
N.	Have you visualized how each meal will appear on the tray?	☐	☐
O.	Do you need to plan garnishes?	☐	☐
P.	Are between-meal nourishments planned?	☐	☐

PART II

A. How did your menu rate? ____________________

B. Is there one particular area that needs improvement? ☐ ☐

If so, which one? ____________________

C. Is there a menu review committee in your facility? ☐ ☐

(NOTE: Since all of the areas in the checklist must be considered when planning menus, it is better to have a committee review menus and make adjustments and refinements.)

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MENU PLANNING
UNIT I

CLINICAL ASSIGNMENT SHEET #2 — PLAN A WEEK'S MENU FOR YOUR FACILITY

NAME ______________________________ SCORE ______________

One of the competencies of a food service supervisor is to be able to plan menus for your facility. The menu should be nutritionally adequate and contain foods that the patients enjoy. You must have the ability to make appropriate substitutions when necessary.

Use the menu-planning form established for your facility and plan a week's menu. With the help of your dietitian, evaluate it by means of the checklist in this unit.

Record comments and/or suggestions here.

FSS - 47-D

MENU PLANNING
UNIT I

CLINICAL ASSIGNMENT SHEET #3 — PLAN ROUTINE MODIFIED-DIET MENUS FOR YOUR FACILITY

NAME ______________________________ SCORE ______________

The *Oklahoma Diet Manual* provides patterns or guides for the dietary department employees in planning menus and preparing meals for prescribed diets. Use one day's general menu that you recorded in Clinical Assignment Sheet #2 and plan three routine modified diets as assigned by your clinical instructor. Write your menu in the spaces provided.

General Diet	**Modified Diet #1**	**Modified Diet #2**	**Modified Diet #3**
Please indicate name of modified diet			
BREAKFAST			
LUNCH			

CLINICAL ASSIGNMENT SHEET #3

General Diet	**Modified Diet #1**	**Modified Diet #2**	**Modified Diet #3**
Please indicate name of modified diet			
SUPPER			
SNACKS			

MENU PLANNING
UNIT I

CLINICAL ASSIGNMENT SHEET #4 — EVALUATE MENU SUBSTITUTIONS

NAME ____________________________ SCORE ______________

Should the need for substitutions arise, it is important to choose a food with equivalent food value. Remember that menus have been planned to meet nutrient requirements, as well as to be pleasing in color, taste, and texture combinations.

PART I

Evaluate the menu substitutions made in your facility on the past two week's menus by completing this assignment sheet.

Using a reference for nutrient content, compare the original menu item with the substitution. List each food, its protein content, vitamin A content, and vitamin C content. Write "S" for satisfactory and "U" for unsatisfactory in the blanks under color, taste, texture, and nutrient content.

Foods	**Protein**	**Vit. A**	**Vit. C**	**Color**	**Taste**	**Texture**	**Nutrient Content**
EXAMPLE: Menu item ¼ cantaloupe	0.5 gm	3.270	31				
Substitution 2 peach halves	0.5 gm	550	3.5	S	S	S	U
Menu item							
Substitution							
Menu item							
Substitution							
Menu item							
Substitution							
Menu item							
Substitution							
Menu item							
Substitution							

CLINICAL ASSIGNMENT SHEET #4

PART II

A. Of the substitutions checked, how many were rated satisfactory in all four catagories?

____

____

____

B. Which categories were usually unsatisfactory? ____________________

____

____

C. What problems do you see when menu substitutions are made?

____

____

____

D. Why were the substitutions necessary? ____________________

____

____

E. How could the procedure for making menu substitutions be improved in your facility?

____

____

____

Comments:

____

____

____

____

____

MENU PLANNING
UNIT I

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #4 — Evaluated to the satisfaction of the clinical instructor

FSS - 53-D

MENU PLANNING
UNIT I

TEST

NAME ____ SCORE ________________

1. Match terms associated with menu planning to their correct definitions. Write the correct numbers in the blanks.

______a. Plan of foods that allows choices between several food items offered

______b. Salesperson; representative of food and/or supply company

______c. Familiar foods that are consumed regularly

______d. An art that determines which food items are to be served and when they are to be served

______e. Main course of a meal

______f. State of being full and/or satisfied

______g. Absence of monotony or sameness

______h. Practices and attitudes that predetermine what, when, and how a person will eat

______i. Food group determined on the basis of a common characteristic

______j. Plan of foods that provides one item per meal component

1. Entree
2. Food habits
3. Food preference
4. KIND
5. Menu planning
6. Nonselective menu
7. Selective menu
8. Satiety
9. Variety
10. Vendor

2. State two major goals of institutional food service.

a. ____

b. ____

3. List three factors that determine type of food service in a health care facility.

a. ____

b. ____

c. ____

TEST

4. State three basic considerations in menu planning.

a. ____________________

b. ____________________

c. ____________________

5. List four techniques used to produce variety in menus.

a. ____________________

b. ____________________

c. ____________________

d. ____________________

6. Select from the following list the mechanics of menu planning. Write an "X" in the blank before each correct answer.

______a. Plan foods in health care facilities that are unfamiliar, and unusual

______b. Consider delivery schedules for raw food items

______c. Arrange work area with many distractors

______d. Develop a system for keeping track of repetition

______e. Use systematic order of item selection

______f. Always plan menus just after eating

7. Arrange in order the steps for nonselective menu item selection. Write a "1" before the first step, a "2" before the second step, and so on.

______a. Select soups, if any

______b. Select breakfast entrees

______c. Have a menu review committee make final adjustments and refinements

______d. Distribute the dinner and lunch entrees over the cycle

______e. Select lunch and dinner breads

______f. Select lunch and dinner desserts

______g. Select lunch and dinner salads

TEST

______h. Select breakfast cereals and/or breads

______i. Select a starchy food, if necessary, to accompany each entree

______j. Select breakfast fruit and/or juice

______k. Select a vegetable to accompany each entree

8. Describe two possible food combinations for each meal of the three-meals-per-day plan.

a. Breakfast

1) ____

2) ____

b. Lunch

1) ____

2) ____

c. Dinner or supper

1) ____

2) ____

9. List three characteristics of a production menu.

a. ____

b. ____

c. ____

10. Select from the following list common mistakes in menu planning. Write an "X" in the blank before each mistake.

______a. Ignoring customer preferences and food habits

______b. Making nutritionally adequate

______c. Settling for variety

______d. Failing to cost menus

______e. Including too many expensive foods

TEST

_____f. Incorporating personal preferences and biases into menus

_____g. Visualizing meal on plate

_____h. Hanging on to popular items

_____i. Ignoring production problems

11. Select from the following list factors to consider in making menu substitutions. Write an "X" in the blank before each correct answer.

_____a. Temperature

_____b. Color

_____c. Taste

_____d. Smell

_____e. Nutrient content

_____f. Variety

_____g. Cost

_____h. Texture

(NOTE: Test questions 12-18 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

12. Use checklist for nutritional adequacy to find errors in menu planning of sample menu.

13. Practice planning a general menu for one day.

14. Practice planning routine modified-diet menus.

15. Use a checklist to evaluate menu characteristics.

16. Plan a week's menu for your facility.

17. Plan routine modified-diet menus for your facility.

18. Evaluate menu substitutions.

MENU PLANNING
UNIT I

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 581. The point total for questions 1-11 is 161; the point total for questions 12-18 is 420.)

1. (20 points)

a.	7	f.	8
b.	10	g.	9
c.	3	h.	2
d.	5	i.	4
e.	1	j.	6

2. (6 points)

   Answer should include any two of the following

   a. Providing the best possible food

   b. Having food attractively served

   c. Maintaining costs within budget

3. (3 points)

   Answer should include any three of the following

   a. Number of meals served per day

   b. Number of food items offered on menu at each meal

   c. Time meals are served

   d. Type of menu

ANSWERS TO TEST

4. (9 points)

Answer should include any three of the following

- a. Nutritional needs of individuals being served
- b. Food habits
- c. Food costs and budget
- d. Equipment available
- e. Number of employees and their skills
- f. Variety

5. (12 points)

Answer should include any four of the following

- a. Controlled repetition of KIND
- b. Contrast in color
- c. Contrast in texture and/or consistency
- d. Contrast in shape
- e. Contrast in temperature
- f. Contrast in flavor
- g. Preparation methods

6. (12 points)

b, d, e

7. (44 points)

a.	6	g.	4
b.	8	h.	9
c.	11	i.	2
d.	1	j.	10
e.	7	k.	3
f.	5		

ANSWERS TO TEST

8. (18 points)

   Answer should include any two of the following under each meal

   a. Breakfast

      1) Fruit or juice, eggs with or without meat, bread item, beverage

      2) Fruit or juice, cereal and milk, beverage

      3) Bread items, beverage

   b. Lunch

      1) Soup, sandwich, dessert, beverage

      2) Salad plate, bread item, dessert, beverage

      3) Casserole, bread item, dessert, beverage

      4) Sandwich, salad, dessert, beverage

   c. Dinner or supper

      1) Appetizer or soup, entree, starchy food, vegetable, salad, bread item, dessert, beverage

      2) Entree, two vegetables, salad, dessert, beverage

      3) Casserole, vegetable, salad, bread item, dessert, beverage

9. (3 points)

   Answer should include any three of the following

   a. Prepared for food service employees

   b. Tells recipes to use

   c. Indicates ingredients of selected food items

   d. Predicts servings needed

   e. Indicates portion size

10. (16 points)

    a, d, f, i

ANSWERS TO TEST

11. (18 points)

    b, c, e, f, g, h

12. Evaluated to the satisfaction of the class instructor (75 points)

13. Evaluated to the satisfaction of the class instructor (50 points)

14. Evaluated to the satisfaction of the class instructor (50 points)

15. Evaluated to the satisfaction of the clinical instructor (35 points)

16. Evaluated to the satisfaction of the clinical instructor (100 points)

17. Evaluated to the satisfaction of the clinical instructor (75 points)

18. Evaluated to the satisfaction of the clinical instructor (35 points)

PURCHASING
UNIT II

UNIT OBJECTIVE

After completing this unit, the student should be able to apply the fundamentals of purchasing. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with purchasing to their correct definitions.
2. Select from a list factors affecting purchasing procedures.
3. Select from a list procedures for purchasing.
4. Name types of markets needed for food service.
5. State guidelines for good purchasing procedures.
6. Select from a list good purchasing specifications.
7. Describe characteristics of an effective purchasing agent.
8. State characteristics of specific categories of purchased food.
9. Select from a list necessary information found on labels.
10. List forms and/or records used in purchasing.
11. Prepare a market order worksheet.
12. Write specifications for food items.
13. Compare prices and products of two vendors.
14. Prepare a purchase order and receiving record.

PURCHASING
UNIT II

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Order materials to supplement unit.

      1. Booklet — *How to Buy Economically: A Food Buyer's Guide*, Home and Garden Bulletin #235, 1981. Available from Consumer Information Center, Department CA, Pueblo, Colorado 81009. Ask for booklet 521K. Free.

         (NOTE: If you want to get the best food values for your money, this twenty-seven-page booklet can help. It includes chapters on buying meat, poultry, eggs, milk, fruits, and vegetables.)

      2. Films

         a. *Egg Grades. . . A Matter of Quality.* Color, 16 mm, 12 minutes, United States Department of Agriculture (USDA), 1973. Available from USDA-AMS Information Division, 1718 Peachtree Street, N.W., Room 206, Atlanta, Georgia 30309, Attention: Connie Crunkleton. Free screening.

            (NOTE: This film describes USDA grades for eggs and shows how eggs are produced, graded, and marketed.)

         b. *Quality for All Seasons.* Color, 18 minutes, USDA, 1974. Available from USDA-AMS Information Division, 1718 Peachtree Street, N.W., Room 206, Atlanta, Georgia 30309, Attention: Connie Crunkleton. Free screening.

            (NOTE: This film presents a colorful overview of the marketing of fresh fruits and vegetables from harvest through distribution to wholesale markets, including inspection of produce for quality.)

         c. *Behind the Grade Mark.* Color, 20 minutes, USDA, 1975. Available from USDA-AMS Information Division, 1718 Peachtree Street, N.W., Room 206, Atlanta, Georgia 30309, Attention: Connie Crunkleton. Free screening.

            (NOTE: This film shows how fruits and vegetables are canned and frozen. It explains USDA grading and what the U.S. grades mean to consumers.)

      3. Charts available for volume food buyers

         a. *Storing Meat and Poultry for Institutional Use.* Color, USDA, n.d. Available from USDA-AMS Information Division, 1718 Peachtree Street, N.W., Room 206, Atlanta, Georgia 30309, Attention: Connie Crunkleton. Order number FSQS-36.

SUGGESTED ACTIVITIES

b. *Cooking Meat and Poultry for Institutional Use.* Color, USDA, n.d. Available from USDA-AMS Information Division, 1718 Peachtree Street, N.W., Room 206, Atlanta, Georgia 30309, Attention: Connie Crunkleton. Order number FSQS-35.

c. *How to Fight the Food Spoilers.* Color, USDA, n.d. Available from USDA-AMS Information Division, 1718 Peachtree Street, N.W., Room 206, Atlanta, Georgia 30309, Attention: Connie Crunkleton. Order number PA-1255.

(NOTE: There are many publications for volume food buyers available from USDA. Write for a listing from USDA-AMS Information Division, 1718 Peachtree Street, N.W., Room 206, Atlanta, Georgia 30309, Attention: Connie Crunkleton.)

4. Book — *The Buying Guide for Fresh Fruits, Vegetables, Herbs and Nuts.* Blue Goose, Inc., 1980. Available from Educational Department, Blue Goose, Inc., P.O. Box 1118, Hagerstown, Maryland 21740.

(NOTE: This book contains 136 pages with color pictures of fresh produce and also has charts with monthly availability of varieties of fruits and vegetables. It is supplied free when used for educational purposes.)

B. Make transparencies.

C. Provide students with objective sheet.

D. Provide students with information and assignment sheets.

E. Discuss unit and specific objectives.

F. Discuss information and assignment sheets.

G. Develop appropriate learning activities for special needs students.

H. Have class discuss various "bargains" that may be offered by vendors and the advisability of purchasing such items.

EXAMPLES: Bent cans, fire sale items, discolored food items

I. Have class members develop a "code of ethics" for the purchasing agent.

J. Discuss with the class some tricks a dishonest distributor might attempt.

EXAMPLES: Switching prices, substituting brands, shorting weight, trimming meat

K. To enhance easy inventory, storerooms should be carefully organized. Have class analyze the best arrangement for quick counting.

EXAMPLE: Groups of similar foods arranged alphabetically

SUGGESTED ACTIVITIES

L. Have students share percentages of total food budget spent on major food divisions in their facilities.

EXAMPLE: Meat, fish, poultry, eggs — 50 to 60 percent
Dairy — 10 to 16 percent
Grocery — 40 to 50 percent

M. Discuss with the class the advantages of using a meat thermometer and low cooking temperature to reduce the cost per serving.

N. Share with the class the following facts about eggs. Usually, if there is less than a seven-cent price spread per dozen between one size eggs and the next smaller size in the same grade, you will get more for your money by buying the larger size. Shell color is determined by breed of hen and does *not* affect grade, nutritive value, flavor, or cooking performance of the egg.

O. Have class figure difference in cost in using whole milk and powdered milk for cooking.

P. Make a copy of the chart of *Common Container Sizes* (see the following page) for each student. Discuss that the size of can must be chosen in relation to the number of servings needed; cans that are too small involve extra labor in opening and higher cost for packaging; cans too large for the amount needed mean leftovers and extra expense.

SUGGESTED ACTIVITIES

Common Container Sizes

Container			Products
Industry term	Consumer description		
	Approx. net weight (check label)	Approx. cups	
8-oz	8 oz	1	Fruits, vegetables, specialties*
Picnic	10 ½ oz	1 ¼	Condensed soups, small quantities of fruits, vegetables, meat and fish products, specialties*
12-oz (vacuum)	12 oz	1 ½	Used largely for vacuum-packed corn
No. 300	1 lb (14 oz) for blueberries 1 lb for most other products	1 ¾	Pork and beans, baked beans, meat products, cranberry sauce, blueberries, specialties*
No. 303	16-17 oz	2	Fruits, vegetables, meat products, ready-to-serve soups, specialties*
No. 2	1 lb 4 oz or 20 oz or 18 fl oz	2 ½	Juices, ready-to-serve soups, specialties,* a few fruits and vegetables
No. 2 ½	1 lb 13 oz or 46 fl oz	3 ½	Fruits, some vegetables (pumpkin, sauerkraut, spinach and other greens, tomatoes)
No. 3 cyl	3 lb 3 oz or 46 fl oz	5 ¾	Fruit and vegetable juices, whole chicken, pork and beans, condensed soup, some vegetables for institutional use
No. 10	6 ½ lb to 7 lb 5 oz	12-13	Fruits, vegetables for restaurant and institutional use

*Specialties: Usually a food combination such as macaroni, spaghetti, Spanish-style rice, Mexican-style foods, Chinese foods, tomato aspic, etc.

Meats, poultry, fish, and seafood are almost entirely advertised and sold under weight terminology.

Substituting One Can for Another Size	Approx.
One No. 10 can equals	Seven No. 303 (1 lb) cans
One No. 10 can equals	Five No. 2 (1 lb 4 oz) cans
One No. 10 can equals	Four No. 2 ½ (1 lb 13 oz) cans
One No. 10 can equals	Two No. 3 cyl (46-50 oz) cans

SUGGESTED ACTIVITIES

Q. Give test.

R. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Transparency masters

1. TM #1 — Grades of Meat
2. TM #2 — USDA Grades
3. TM #3 — Inventory Form
4. TM #4 — Food Order Schedule
5. TM #5 — Market Order Worksheet
6. TM #6 — Purchase Order and Receiving Record
7. TM #7 — Monthly Food Purchase Record
8. TM #8 — Monthly Meal Census

E. Class assignment sheets

1. Class Assignment Sheet #1 — Compare Costs of Beef Stews
2. Class Assignment Sheet #2 — Prepare a Market Order Worksheet

F. Answers to class assignment sheets

G. Clinical assignment sheets

1. Clinical Assignment Sheet #1 — Write Specifications for Food Items
2. Clinical Assignment Sheet #2 — Compare Prices and Products of Two Vendors
3. Clinical Assignment Sheet #3 — Prepare a Purchase Order and Receiving Record

H. Answers to clinical assignment sheets

I. Test

J. Answers to test

SUGGESTED ACTIVITIES

III. Unit references

A. Barker, Ellen. *Food Purchasing and Cost Control Seminar.* Oklahoma City, Oklahoma: Special Unit on the Aging, Division of the Oklahoma State Department of Human Services, 1981.

B. Grimes, Vici, and Jerald Chesser. *Food Service: Production and Service.* Stillwater, Oklahoma: State Department of Vocational and Technical Education/Curriculum and Instructional Materials Center, 1976.

C. Knight, John B., and Lendal H. Kotschevar. *Quantity Food Production, Planning, and Management.* Boston, Massachusetts: CBI Publishing Company, Inc., 1979.

D. Mahaffey, Mary J., et al. *Food Service Manual for Health Care Institutions.* Chicago, Illinois: American Hospital Association, 1981.

E. Ross, Lynne N., and Roberta M. McHenry. *Food Purchasing: Study Course.* Ames, Iowa: Iowa State University Press, 1978.

F. West, B.B., et al. *Food for Fifty*, 6th ed. New York: John Wiley and Sons, Inc., 1979.

G. West, B.B., et al. *Food Service in Institutions*, 5th ed. New York: John Wiley and Sons, Inc., 1977.

PURCHASING
UNIT II

INFORMATION SHEET

I. Terms and definitions

A. Commodities — Everything movable that is bought or sold

EXAMPLES: Produce, goods, wares, merchandise

(NOTE: *Commodities* is also the name given surplus foods distributed by the government.)

B. Food and Drug Administration (FDA) — Federal agency responsible for the regulation of the production, manufacture, and distribution of all food except meat and poultry involved in interstate commerce

C. United States Department of Agriculture (USDA) — Federal agency responsible for the regulation of meat and poultry (Transparencies #1 and #2)

(NOTE: USDA has grading and inspection programs designed to certify quality and condition of agricultural commodities and food products.)

D. Market — Transfer of ownership

(NOTE: Formal market is where buyers and sellers or their agents meet; informal market may be over the telephone, in an office, etc.)

E. Ordering — Informing vendors of items needed

(NOTE: Ordering is done from written specifications prepared by the purchasing agent.)

F. Purchasing — Considering all specific needs, and then buying for a price

(NOTE: Quantity food buying for a health care facility is a highly complex task.)

G. Purchasing agent — Buyer

H. Specifications — Precise descriptions of quality and other factors required in an item to suit production needs

EXAMPLE: One case, No. 10 cans, Blue Lake regular-cut green beans

I. Can cutting — Comparing several brands of same item by obtaining samples and opening them to check color, taste, texture, and other desirable characteristics

INFORMATION SHEET

II. Factors affecting purchasing procedures

(NOTE: Buying procedures must be individualized to meet each facility's needs.)

A. Type and image of facility

B. Financial resources of facility

C. Closeness to supply

D. Menu

E. Number and skills of employees

F. Type of service

G. Amount of storage

(NOTE: Consider all storage: dry, refrigerated, frozen.)

H. General market and economic conditions

EXAMPLES: Availability, seasonability, price trends, supply

I. Shelf life of food

III. Procedures for purchasing (Class Assignment Sheet #1; Clinical Assignment Sheet #1)

A. Check menu for food items to be used

B. Check recipes for ingredients needed

C. Figure the amounts of each item needed to produce the desired quantity between now and the next time food will be purchased

D. Check amount on hand

(NOTE: Adjust the list of foods to be purchased so that you do not order more food than will be needed.)

E. Obtain price quotations on merchandise ordered

F. Obtain price comparisons from at least two vendors

(NOTE: Compare vendor prices to make the best purchase.)

G. Use purchase orders

H. Write specifications for all items to be purchased

INFORMATION SHEET

    I. Place the order according to the amount needed and specifications desired

IV. Types of markets needed for food service

  A. Perishable

  EXAMPLES: Fresh fruits and/or vegetables, meats, frozen foods

  B. Staple

  EXAMPLE: Items that can be stored without refrigeration

  C. Daily-use needs

  EXAMPLES: Milk, bread, coffee

  D. Nonfood items

  EXAMPLES: Cleaning supplies, paper goods, dishes

V. Guidelines for good purchasing procedures

  A. Develop specifications for each food item purchased

  B. Consider condition of fresh fruits and vegetables

  (NOTE: Excessive waste from damaged products means higher cost per serving.)

  C. Compare prices from different vendors

  (NOTE: Can cutting allows you to compare color, flavor, texture, and drained weight of item.)

  D. Look at vendor's reliability, service, and quality control

  (NOTE: Price is not the only consideration in purchasing.)

  E. Get as much information as you can

  (NOTE: Vendors can tell you when certain items will be short. Find the package size that best suits your needs.)

  F. Consider your facility's needs

  (NOTE: Avoid buying an item just because the salesperson says that another facility is using it.)

  (CAUTION: Nourishments are a hidden cost factor. Some facilities count three nourishments as equal in cost to one meal.)

INFORMATION SHEET

G. Ask for a sample of a new item

(NOTE: Avoid buying large quantities of an unknown item.)

H. Look for nutritional values at lower cost

EXAMPLES: Less expensive cuts of meat have the same nutritional value as more expensive cuts. Dry skim milk has at a lower cost the same nutritional value as fluid skim milk.

I. Adjust amount ordered to anticipated number of meals to be served

EXAMPLE: If census is down on holidays, order less food.

J. Occasionally compare taste and yield from standard items

EXAMPLE: Mixes, soups, entrees

K. Consider cost per serving rather than unit price

(NOTE: A food of higher quality and higher unit price may yield more servings of better quality and at a lower cost per serving than the same food of lower quality and price.)

L. Purchase only the types, quality, and quantities required for the planned menu

(NOTE: However, if a special economical buy comes along and storage is available, take advantage of the savings and purchase.)

VI. Good purchasing specifications (Clinical Assignment Sheet #2)

(NOTE: Buyers use specifications to clearly describe the item they wish to purchase.)

A. Common name of the item

EXAMPLES: Green beans, French-cut or Blue Lake green beans

B. Quantity in a case, number of pounds in a bag, or number of packets in a carton

EXAMPLES: Six No. 10 cans, 1,000 packets of sugar per carton

C. Federal grade or brand desired (Transparencies #1 and #2)

D. Size or number of items per package

EXAMPLES: Forty-six-ounce can of tomato juice, 30 to 35 count of peach halves

INFORMATION SHEET

E. Unit size in which prices will be quoted

EXAMPLES: A pound, a case of twenty-four No. 2s

F. Other factors appropriate to describe a specific product

EXAMPLES: Whole-kernel corn, cream-style corn

(NOTE: Type and style, drained weight, sieve size, count size, and syrup density are all factors that may appear on specifications.)

VII. Characteristics of an effective purchasing agent

A. Is courteous at all times

B. Is fair

(NOTE: There is give and take in all buying/selling situations.)

C. Is honest

(NOTE: Accepting gifts from sellers may compromise the purchasing agent's objectivity. This situation should be covered in your facility's code of ethics.)

D. Is knowledgeable about food preparation and service

EXAMPLE: Do not pay a premium price for red-skinned apples when they are to be peeled before serving.

(NOTE: Buyers need to know a great deal about preparing and serving food to enable them to make proper selections for the use intended.)

E. Is able to compare products with regard to price, quality, and service

(NOTE: Do not disclose one company's prices to a competitor.)

F. Is careful with the facility's money

(NOTE: Purchasing agents should be as careful with the facility's money as they are with their own money.)

G. Is aware of market conditions

(NOTE: Quantities and prices follow seasonal variations. Usually commodities are best in quality and lowest in price at the peak of their season.)

H. Is able to coordinate purchasing with careful inspection of deliveries for quantity and quality control

INFORMATION SHEET

VIII. Characteristics of specific categories of purchased food

(NOTE: The type of food purchased should be based on purchase cost, labor cost, and the quality of the finished product. Select food type according to *intended use*.)

A. Fresh foods

1. Must be bought in season
2. Have short storage life
3. Require adequate storage facilities

   (NOTE: With the exception of root vegetables, fresh vegetables can be stored only two to five days.)

B. Frozen foods

1. Consistently provide good quality

   (NOTE: Frozen foods should be frozen hard on delivery.)

2. Provide standard sizes
3. Have long storage life
4. Provide variety throughout the year

C. Canned foods

1. Consistently provide good quality
2. Provide standard sizes
3. Have long shelf life
4. Provide variety throughout the year

D. Convenience foods

EXAMPLES: Frozen and canned entrees, dry mixes, canned sauces

1. Consistently provide good quality
2. Reduce labor

   (NOTE: Consider what the employees could do with time saved.)

3. Usually cost more than the raw ingredients to make same item

INFORMATION SHEET

4. Require more storage

5. Add variety to menu

   (NOTE: Convenience foods should be checked for quality and flavor. Seasonings should be familiar to patients.)

6. May not provide adequate protein per serving for an entree item

7. May come pre-portioned

   (CAUTION: Be sure that the patient can open the individual packets of jelly and/or salad dressing.)

IX. Necessary information found on labels

(NOTE: Labels tell the purchaser whether or not the item will meet specifications. According to the FDA, the following information must be on labels of foods going across state lines.)

A. Name of the product and variety or style when applicable

B. Name and address of the manufacturer, packer, or shipper

C. Accurate statement of the quantity

EXAMPLE: Weight or count

D. List of ingredients

(NOTE: The order of listing indicates the relative amount of each food item; the food present in the largest quantity comes first.)

E. Enough facts to fully inform the purchaser concerning foods for special dietary purposes

F. Statement of the use of artificial flavorings, colorings, imitations, or chemical preservatives

G. Indication and explanation of substandard quality or substandard fill of container

(NOTE: Such food must be wholesome, although it does not measure up to prescribed minimums in a stated way. *Wholesomeness* implies that a food is safe for consumption and is capable of contributing nutritive value to diet.)

INFORMATION SHEET

EXAMPLES: BELOW STANDARD IN QUALITY
GOOD FOOD — NOT HIGH GRADE

or

BELOW STANDARD IN QUALITY
EXCESSIVE DISCOLORED PEAS

H. Required information in an easy-to-find and easy-to-understand statement

X. Forms and/or records used in purchasing

A. Inventory form (Transparency #3)

B. Food order schedule (Transparency #4)

C. Market order worksheet (Transparency #5; Class Assignment Sheet #2)

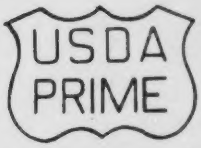
D. Purchase order and receiving record (Transparency #6; Clinical Assignment Sheet #3)

E. Monthly food purchase record (Transparency #7)

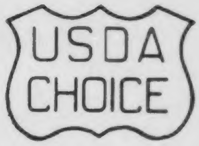
F. Monthly meal census (Transparency #8)

Grades of Meat

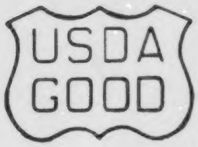
Prime beef is the best and most expensive.

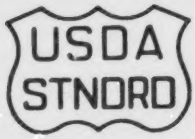


Choice beef is high quality.

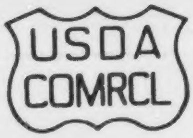

USDA
CHOICE

Good grade beef is not as juicy and flavorful as prime or choice.



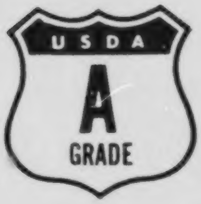

USDA
STNDRD

Standard grade beef has very little fat and a mild fravor.

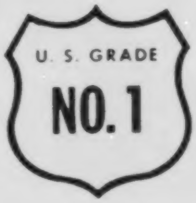

USDA
COMRCL

Commercial grade beef comes from older cattle and is not very tender.

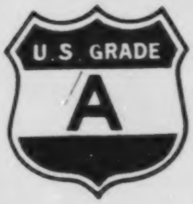
USDA Grades


USDA
A
GRADE

Used on egg cartons.


U. S. GRADE
NO. 1

Used for most fresh fruits and vegetables.



Used on canned, frozen, and dried fruits and vegetables.

Inventory Form

		Amount on Hand			
Product and Description	Size of Case	Date	Date	Date	Date
Apples, whole baked, 20 ct	6 #10				
Applesauce	6 #10				
Apples, sp red rings, 75-85 ct, hs	6 #10				
Apricots, halves, unpeeled, 90-110 ct, ls	6 #10				

Code: ct-count; sp-spiced; ls-light syrup; hs-heavy syrup

TM #3

FSS - 81-D

FSS - 83-D

Food Order Schedule

Vendor	Item	Place Order	For Delivery

Market Order Worksheet

Food	Specifications (Grade, Etc.)	No. Times on Menu	Amounts		Amount on Hand	Amount To Purchase
			Each Time	Total		
EXAMPLE: Green Beans, Cut	Fancy Blue Lake	3	4 #10	2 cs.	1 cs.	1 cs.

TM #5

FSS - 85-D

Purchase Order And Receiving Record

Ordered From	Item	Quantity	Brand	Quotation Price	No. Serv. / Purchase Unit	Cost / Portion	Variation/ Shortage	Rec'd. by
Example: Super Store	Cut Green Beans	1cs.	Red Label	$7.20	24	$.30	-0-	a.f.

Monthly Food Purchase Record

Month June 19

Date	Vendor or Supplier	Total	Nonfood Items	Total Minus Nonfood Items	Total to Date
1	Supplier A (produce)	$35.00		$35.00	
	Supplier B (bakery)	12.00		12.00	$47.00
2	Supplier C (grocery)	40.00	$10.00	30.00	
	Supplier D (dairy)	45.00		45.00	122.00

TM #7

FSS - 89-D

Monthly Meal Census

Month June 19

Date	Patients			Personnel			Guests			Total Meals	
	B	L	D	B	L	D	B	L	D	Daily	To Date
1		73	68	17	53	11	1	23	7	315	315
2	51	64	57	15	50	8	...	17	5	267	582
3	47	61	52	12	51	12	2	21	8	266	848
4	65	76	71	18	56	14	3	27	11	341	1,189
5											
6											
7											

Code: B-breakfast; L-lunch; D-dinner

747

TM #8

FSS - 91-D

PURCHASING
UNIT II

CLASS ASSIGNMENT SHEET #1 — COMPARE COSTS OF BEEF STEWS

NAME ______________________________ SCORE ______________

An effective buyer needs to know how to compare costs of foods prepared from raw ingredients and convenience foods.

PART I

Using the following facts, calculate the cost of beef stew made from fresh meat and the cost of convenience beef stew. Compare the food cost difference.

Fresh Beef Stew	**Convenience Beef Stew**
Beef $20.00	4 boxes per case, $43.00 per case
Miscellaneous $14.00	Yields 25 (3-ounce) portions per box
Recipe yield is 100 (3-ounce) portions	

	Fresh Stew	Convenience Stew
Figure total food cost.	A.	C.
Figure cost per serving (3-ounce) portion.	B.	D.

E. When is the cost of convenience food justified? ______________________________

____

PART II

Compare the cost of the following two forms of convenience beef stew.

A. If canned beef stew is six 50-ounce cans for $35.29, what is the cost of a 4-ounce portion? ______________

B. If frozen beef stew is four 5-pound packages for $32.32, what is the cost of a 4-ounce portion? ______________

C. How many cases of six 50-ounce cans would have to be ordered for one hundred 4-ounce servings of canned beef stew?

1. How many cans would be used? ______________________________

2. How many 4-ounce servings would be left? ______________________________

D. Which of the above products would be the best buy?

____

PURCHASING
UNIT II

CLASS ASSIGNMENT SHEET #2 — PREPARE A MARKET ORDER WORKSHEET

NAME ______________________________ SCORE ____________

The menu is the basis for all purchasing. It is important to use the menu to develop your purchase order.

Using the following three-day menu and forms and the instructions that follow, prepare a market order worksheet. Base your market order on the average number of meals served daily at your facility, which is __________. Also, write a check (✓) on the menu beside each item after you have accounted for that item on the market order worksheet.

A. List each meat item that is bought fresh and number of times it is used on the menu. List eggs.

B. List all frozen items and number of times the item is used on the menu.

C. List all fresh produce and number of times the item is used on the menu.

D. List all canned goods and staples needed for the menu and number of times the item is used on the menu.

E. List bread, coffee, and milk amounts for standing orders.

EXAMPLE:

(NOTE: The following example is based on one hundred servings. Amounts to purchase are based on information from *Food for Fifty*.)

MARKET ORDER WORKSHEET

Food	Specifications (Grade, etc.)	No. Times on Menu	Amounts		Amount on Hand	Amount to Purchase
			Each Time	Total		
Chicken	Grade A, whole fryers $2^1/_2$-$2^3/_4$ lb each	1	25 fryers	25 fryers	—	25 fryers
Ham	Cured, cubed	1	10 lb	10 lb	—	10 lb

CLASS ASSIGNMENT SHEET #2

MENU

DAY I	DAY II	DAY III
Breakfast Orange juice Scrambled eggs Bacon Toast Jelly Milk, tea, coffee	**Breakfast** Tomato juice French toast Sausage Jelly/syrup Milk, tea, coffee	**Breakfast** Blended orange and grapefruit juice Biscuit, buttered Honey Poached egg Milk, tea, coffee
Lunch Fried chicken Mashed potato Cream gravy English peas Hot roll, butter Fresh fruit cup Milk, tea, coffee	**Lunch** Roast beef Brown gravy Oven brown potato Buttered zucchini Green salad with Italian dressing Whole-wheat bread, buttered Rainbow sherbet Milk, tea, coffee	**Lunch** Baked pork chop Sweet potato Buttered spinach Spiced apple ring salad Bread, buttered Brownie with nuts Milk, tea, coffee
Supper Ham cubes Pinto beans Cole slaw Corn bread, butter Cherry gelatin with topping Milk, tea, coffee	**Supper** Tuna noodle casserole Buttered broccoli Carrot and pineapple salad Thick-sliced bread, buttered Sugar cookies Milk, tea, coffee	**Supper** Salisbury steak Baked potato Buttered green beans Sliced tomato salad with French dressing Bread, buttered Vanilla ice cream Milk, tea, coffee

FSS - 97-D

CLASS ASSIGNMENT SHEET #2

MARKET ORDER WORKSHEET

Food	Specifications (Grade, etc.)	No. Times on Menu	Amounts		Amount on Hand	Amount to Purchase
			Each Time	Total		

98-D

CLASS ASSIGNMENT SHEET #2

MARKET ORDER WORKSHEET

Food	Specifications (Grade, etc.)	No. Times on Menu	Amounts		Amount on Hand	Amount to Purchase
			Each Time	Total		

FSS - 99-D

CLASS ASSIGNMENT SHEET #2

MARKET ORDER WORKSHEET

Food	Specifications (Grade, etc.)	No. Times on Menu	Amounts		Amount on Hand	Amount to Purchase
			Each Time	Total		

100-D

CLASS ASSIGNMENT SHEET #2

MARKET ORDER WORKSHEET

Food	Specifications (Grade, etc.)	No. Times on Menu	Amounts		Amount on Hand	Amount to Purchase
			Each Time	Total		

CLASS ASSIGNMENT SHEET #2

MARKET ORDER WORKSHEET

Food	Specifications (Grade, etc.)	No. Times on Menu	Amounts		Amount on Hand	Amount to Purchase
			Each Time	Total		

PURCHASING
UNIT II

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

PART I

A. $34.00

B. 34¢

C. $43.00

D. 43¢

E. Some correct answers might include

1. As a means of having more variety in the menu
2. When skilled labor is not available
3. When lacking sufficient employees, due to illness, strike, etc.
4. When labor costs are too high

PART II

A. 47¢

B. 40¢

C. 2 cases

1. 8 cans
2. 50 servings

D. Frozen beef stew

Class Assignment Sheet #2 — Evaluated to the satisfaction of the class instructor

PURCHASING
UNIT II

CLINICAL ASSIGNMENT SHEET #1 — WRITE SPECIFICATIONS FOR FOOD ITEMS

NAME ____________________ SCORE ____________

Purchasing by specification removes all doubt about which particular food item you want. Other employees can do the ordering, and the items you receive will be suitable for their intended use.

Using the following chart, write specifications for one food item in each category used in your facility.

SPECIFICATION FORM

Name of Food Item	Amount in Case or Carton	Grade or Brand	Size of Container	Unit Price Is Quoted in	Other Factors*
Fresh Food					
Canned Food					
Frozen Food					
Meat Item					

*(NOTE: Other factors may include type and style, drained weight, sieve size, count size, syrup density, and so on.)

PURCHASING
UNIT II

CLINICAL ASSIGNMENT SHEET #2 — COMPARE PRICES AND PRODUCTS OF TWO VENDORS

NAME ______________________________ SCORE ______________

As a purchasing agent, you want to get the best buy for the money spent. Price is an important consideration but certainly not the only one. Purchasing for a health care facility is a highly complex task. One way to obtain the best buy for the money is to compare prices and products of two vendors.

Using the following chart, obtain prices from two different vendors for canned peaches, ground beef, and frozen broccoli. Decide which product gives you what you want for the best price.

	Size of Unit (can or lb)	Form (slices, halves, diced) and Count	Drained Weight*	Color, Flavor, Texture, Syrup Density	Vendor/Prices	
					A	B
Canned Peaches						

	Unit	Specification (fat content)			Vendor/Prices	
					A	B
Ground Beef						

	Size of Unit	Form (spears or chopped)		Color, Flavor, Texture	Vendor/Prices	
					A	B
Frozen Broccoli						

*(NOTE: Drained weight helps determine the yield. To obtain drained weight, pour the contents of the can into a strainer; allow time for juice to drain off; weigh solids. Allow to drain for the same period of time.)

A. Which products did you choose as the best buy? ______________________

B. How did the price per serving compare? ______________________

C. Can you give an example to show that sometimes paying more for an item is more economical? ______________________

Comments: ______________________

____

PURCHASING
UNIT II

CLINICAL ASSIGNMENT SHEET #3 — PREPARE A PURCHASE ORDER AND RECEIVING RECORD

NAME ______________________________ SCORE ______________

Raw food costs for an adequate diet in a health care facility may be more than $2.00 per serving, per day. This becomes an impressive sum in one year when food for fifty people may cost more than $36,000. As a food service supervisor, the purchase of food may be your responsibility. You need to get the best value for the money spent. One important factor is control of purchasing and receiving goods.

PART I

Prepare a purchase order, as assigned by your clinical instructor, using the forms for your facility. If you do not presently use a purchase order form, list all the data that you use to place an order for canned peaches and canned spinach.

A. Canned peaches-- ______________________________

B. Canned spinach-- ______________________________

C. Are these good specifications? ______________________________

D. If not, what information is lacking? ______________________________

____

E. If your regular salesperson is on vacation, would the relief person know exactly which item you want from your order? ______________________________

____

PART II

Plan to be available to check in the foods you ordered in Part I. Using the form(s) available in your facility or the one on the following page, prepare a receiving record. You may make extra copies of the form on the next page if needed. Discuss the results with your clinical instructor.

110-D

Purchase Order And Receiving Record

Ordered From	Item	Quantity	Brand	Quotation Price	No. Serv. / Purchase Unit — Cost / Portion	Variation / Shortage Rec'd. by

CLINICAL ASSIGNMENT SHEET #3

PURCHASING
UNIT II

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

PURCHASING
UNIT II

TEST

NAME ____ SCORE ________________

1. Match terms associated with purchasing to their correct definitions. Write the correct numbers in the blanks.

______a. Informing vendors of items needed

______b. Precise descriptions of quality and other factors required in an item to suit production needs

______c. Federal agency responsible for the regulation of the production, manufacture, and distribution of all food except meat and poultry involved in interstate commerce

______d. Everything movable that is bought or sold

______e. Buyer

______f. Transfer of ownership

______g. Federal agency responsible for the regulation of meat and poultry

______h. Considering all specific needs, and then buying for a price

______i. Comparing several brands of same item by obtaining samples and opening them to check color, taste, texture, and other desirable characteristics

1. Commodities
2. Food and Drug Administration (FDA)
3. United States Department of Agriculture (USDA)
4. Can cutting
5. Ordering
6. Purchasing
7. Purchasing agent
8. Specifications
9. Market

2. Select from the following list factors affecting purchasing procedures. Write an "X" in the blank before each correct answer.

______a. Menu

______b. Age and sex of employees

______c. Type and image of facility

______d. General market and economic conditions

______e. Number and skills of employees

TEST

______f. Financial resources of facility

______g. Type of service

______h. Personality of vendors

______i. Closeness to supply

______j. Amount of storage

______k. Shelf life of food

3. Select from the following list procedures for purchasing. Write an "X" in the blank before each correct answer.

______a. Check with cooks for ingredients needed

______b. Check amount on hand

______c. Buy from one vendor to make the best purchase

______d. Place the order according to the amount needed and specification desired

______e. Check menu for food items to be used

______f. Figure the amounts of each item needed to produce the desired quantity between now and the next time food will be purchased

______g. Buy from the vendor who gives you gifts

______h. Use purchase orders occasionally

______i. Write specifications for the majority of items to be purchased

______j. Obtain price quotations on merchandise ordered

4. Name three types of markets needed for food service.

a. ____

b. ____

c. ____

5. State five guidelines for good purchasing procedures.

a. ____

b. ____

TEST

c. ______________________________

d. ______________________________

e. ______________________________

6. Select from the following list good purchasing specifications. Write an "X" in the blank before each correct answer.

______a. Unit size in which prices will be quoted

______b. Vendor's representative

______c. Size or number of items per package

______d. Other factors appropriate to describe a specific product

______e. Name of recipe

______f. Quantity in a case, number of pounds in a bag, or number of packets in a carton

______g. Federal grade or brand desired

______h. Uncommon name of the item

7. Describe characteristics of an effective purchasing agent.

____

____

____

____

____

____

____

____

TEST

8. State three characteristics from each of the specific categories of purchased food.

   a. Fresh foods

      1) ______________________________

      2) ______________________________

      3) ______________________________

   b. Frozen foods

      1) ______________________________

      2) ______________________________

      3) ______________________________

   c. Canned foods

      1) ______________________________

      2) ______________________________

      3) ______________________________

   d. Convenience foods

      1) ______________________________

      2) ______________________________

      3) ______________________________

9. Select from the following list necessary information found on labels. Write an "X" in the blank before each correct answer.

   _____a. Name and address of vendor

   _____b. List of ingredients

   _____c. Required information must be in very small print and written in technical jargon

   _____d. Indication and explanation of substandard quality or substandard fill of container

   _____e. Name of the product and variety or style when applicable

   _____f. Inaccurate statement of the quantity

TEST

_____g. Statement of the use of artificial flavorings, colorings, imitations, or chemical preservatives

_____h. Name and address of the manufacturer, packer or shipper

_____i. Enough facts to fully inform the purchaser concerning foods for special dietary purposes

10. List three forms and/or records used in purchasing.

a. ____

b. ____

c. ____

(NOTE: Test questions 11-14 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

11. Prepare a market order worksheet.

12. Write specifications for food items.

13. Compare prices and products of two vendors.

14. Prepare a purchase order and receiving record.

PURCHASING
UNIT II

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 310. The point total for questions 1-10 is 155; the point total for questions 11-14 is 155.)

1. (18 points)

a.	5
b.	8
c.	2
d.	1
e.	7
f.	9
g.	3
h.	6
i.	4

2. (22 points)

   a, c, d, e, f, g, i, j, k

3. (20 points)

   b, d, e, f, j

4. (3 points)

   Answer should include any three of the following

   a. Perishable

   b. Staple

   c. Daily-use needs

   d. Nonfood items

ANSWERS TO TEST

5. (15 points)

Answer should include any five of the following

a. Develop specifications for each food item purchased

b. Consider condition of fresh fruits and vegetables

c. Compare prices from different vendors

d. Look at vendor's reliability, service, and quality control

e. Get as much information as you can

f. Consider your facility's needs

g. Ask for a sample of a new item

h. Look for nutritional values at lower cost

i. Adjust amount ordered to anticipated number of meals to be served

j. Occasionally compare taste and yield from standard items

k. Compare cost per serving rather than unit price

l. Purchase only the types, quality, and quantities required for the planned menu

6. (16 points)

a, c, d, f, g

7. (16 points)

Description should include the following

a. Is courteous at all times

b. Is fair

c. Is honest

d. Is knowledgeable about food preparation and service

e. Is able to compare products with regard to price, quality, and service

f. Is careful with the facility's money

ANSWERS TO TEST

g. Is aware of market conditions

h. Is able to coordinate purchasing with careful inspection of deliveries for quantity and quality control

8. (24 points)

Answer should include any three from each of the following categories

a. Fresh foods

   1) Must be bought in season

   2) Have short storage life

   3) Require adequate storage facilities

b. Frozen foods

   1) Consistently provide good quality

   2) Provide standard sizes

   3) Have long storage life

   4) Provide variety throughout the year

c. Canned foods

   1) Consistently provide good quality

   2) Provide standard sizes

   3) Have long shelf life

   4) Provide variety throughout the year

d. Convenience foods

   1) Consistently provide good quality

   2) Reduce labor

   3) Usually cost more than the raw ingredients to make same item

   4) Require more storage

   5) Add variety to menu

ANSWERS TO TEST

6) May not provide adequate protein per serving for an entree item

7) May come pre-portioned

9. (18 points)

b, d, e, g, h, i

10. (3 points)

Answer should include any three of the following

a. Inventory form

b. Food order schedule

c. Market order worksheet

d. Purchase order and receiving record

e. Monthly food purchase record

f. Monthly meal census

11. Evaluated to the satisfaction of the class instructor (50 points)

12. Evaluated to the satisfaction of the clinical instructor (20 points)

13. Evaluated to the satisfaction of the clinical instructor (35 points)

14. Evaluated to the satisfaction of the clinical instructor (50 points)

SUPERVISION OF RECEIVING AND STORAGE
UNIT III

UNIT OBJECTIVE

After completing this unit, the student should be able to supervise receiving, storage, and inventory used in the student's place of employment. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with receiving, storage, and inventory control to their correct definitions.
2. List reasons for proper receiving, storage, and inventory control.
3. Describe essentials of a receiving area.
4. List elements of a receiving system.
5. List types of receiving records.
6. Select from a list reasons for maintaining receiving records.
7. Distinguish among characteristics of receiving records.
8. Describe essentials of dry storage areas.
9. Describe essentials of refrigerator and freezer storage areas.
10. State temperature ranges for refrigerator and freezer storage.
11. Select from a list measures for security of storage areas.
12. State the purpose of inventory.
13. Name types of inventories.
14. Complete a daily receiving record and request for credit memo.
15. Complete a perpetual inventory.
16. Evaluate a food service receiving area.
17. Evaluate food service storage areas.

SUPERVISION OF RECEIVING AND STORAGE
UNIT III

SUGGESTED ACTIVITIES

I. Suggested activities

  A. Provide students with objective sheet.

  B. Discuss unit and specific objectives.

  C. Provide students with information and assignment sheets.

  D. Discuss information and assignment sheets.

  E. Develop appropriate learning activities for special needs students.

  F. Review the *Food Service Worker* unit on receiving in Section D, Unit I, "Receiving, Food Handling, and Storage."

  G. Arrange a class trip to an institution with central purchasing and a dietary department that receives its own supplies to see if it has the essentials of a good receiving area. Also inspect the storage areas.

  H. Collect samples of receiving records and inventories to show students the different types.

  I. Arrange for a guest speaker to discuss computer food inventories.

  J. Discuss methods of storeroom organization, and ask students to discuss the method used in their departments.

  K. Give test.

  L. Reteach if necessary.

II. Instructional materials

  A. Objective sheet

  B. Suggested activities

  C. Information sheet

  D. Class assignment sheets

    1. Class Assignment Sheet #1 — Complete a Daily Receiving Record and Request for Credit Memo

    2. Class Assignment Sheet #2 — Complete a Perpetual Inventory

SUGGESTED ACTIVITIES

E. Answers to class assignment sheets

F. Clinical assignment sheets

   1. Clinical Assignment Sheet #1 — Evaluate a Food Service Receiving Area

   2. Clinical Assignment Sheet #2 — Evaluate Food Service Storage Areas

G. Answers to clinical assignment sheets

H. Test

I. Answers to test

III. Unit references

A. Curtis, Bob. *Food Service Security: Internal Control.* New York: Chain Store Publishing Co., 1975.

B. *Food Service Manual for Health Care Institutions,* 4th ed. Chicago: American Hospital Association, 1981.

C. Truitt, Debbie. *Food and Nutrition.* Stillwater, Oklahoma: State Department of Vocational and Technical Education/Curriculum and Instructional Materials Center, 1980.

D. West, B.B., et al. *Food Service in Institutions,* 5th ed. New York: John Wiley and Sons, Inc., 1977.

SUPERVISION OF RECEIVING AND STORAGE
UNIT III

INFORMATION SHEET

I. Terms and definitions

- A. Invoice — Delivery slip that accompanies an order
- B. Physical inventory — Periodic actual count of all stock
- C. Perpetual inventory — Ongoing record of each stock item on hand
- D. Loading dock — Outside platform where goods are received and unloaded
- E. Vendor — Supplier of products
- F. Distribution — Destination of items in storage area

  EXAMPLES: Dry storage area, produce refrigerator
- G. Request for credit memo — Form on which buyer notifies vendor of errors or damaged products so that account can be corrected
- H. Extensions — Cost per unit multiplied by amount purchased; used to determine capital invested in inventory
- I. Disbursements — Amount of goods issued from storeroom to preparation areas

II. Reasons for proper receiving, storage, and inventory control

- A. Safety of food

  EXAMPLE: First-in, first-out policy ensures that the oldest product is used first.
- B. Sanitation of facilities

  EXAMPLE: Control of rodents
- C. Sensible arrangement of food

  EXAMPLE: A system facilitates locating items.
- D. Security of food and supplies

  EXAMPLE: Security reduces pilferage and waste.

INFORMATION SHEET

III. Essentials of a receiving area (Clinical Assignment Sheet #1)

A. Location — Easily accessible from street or highway

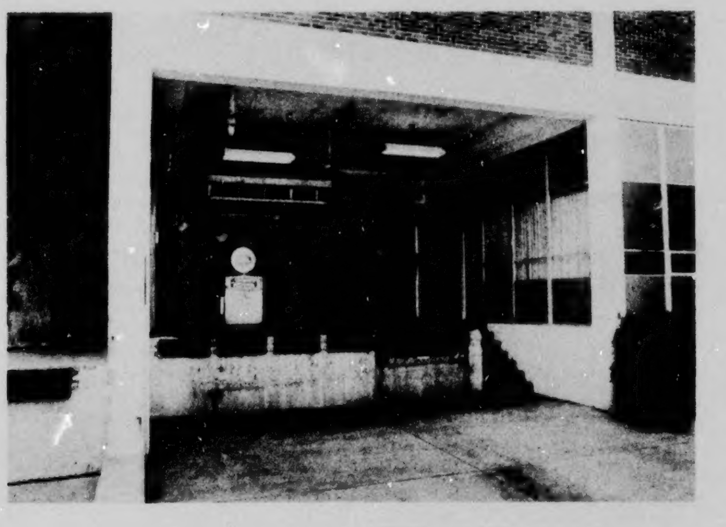
B. Loading dock (Figure 1)

1. Height — Level of standard truck floor above driveway and same level as floor of entrance to building
2. Width — Minimum of 8 feet
3. Length — Long enough to accommodate number of trucks that might need to unload at one time

(NOTE: A ramp or steps should be provided at one end of the dock for pedestrians.)

EXAMPLE:

FIGURE 1



C. Receiving area (Figure 2)

1. Size — Large enough to accommodate quantity of products that might be delivered at one time

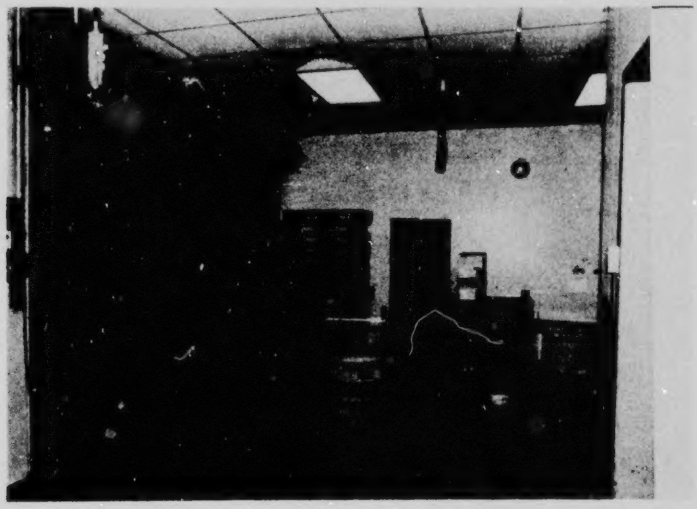
EXAMPLES: Outside door, 4 or 5 feet wide; double regular-sized doors

INFORMATION SHEET

2. Space — Large enough to house equipment for receiving

EXAMPLE:

FIGURE 2



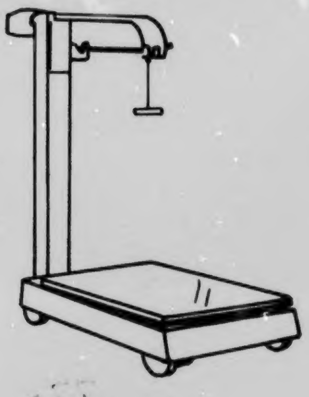
D. Equipment

1. Platform scales — Accurate scales to weigh meat and other bulk items (Figure 3)

(NOTE: Flat, skid-type receiving scales may be used in small institutions where platform scales are not affordable.)

EXAMPLE:

FIGURE 3

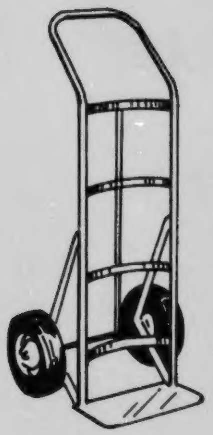


INFORMATION SHEET

2. Hand trucks — Sturdy enough to transport items to storage (Figure 4)

   EXAMPLE:

FIGURE 4



3. Desk or shelf — Large enough to hold papers while checking in items

IV. Elements of a receiving system

(NOTE: The receiving procedure is outlined in *Food Service Worker,* Section D, Unit I, "Receiving, Food Handling, and Storage.")

A. Receiving clerk

EXAMPLE: Supervisor or cook

(NOTE: Receiving should be assigned to one or two specific, responsible, honest employees.)

B. Receiving records

EXAMPLES: Invoices, daily receiving records, request for credit memo

INFORMATION SHEET

V. Types of receiving records

A. Invoice

EXAMPLE:

INVOICE: #3751
DATE: 10/14/8-
DELIVERED TO: Somewhere Hospital

Taft Company
1741 E. Finch St.
Somewhere, State

QUANTITY	UNIT	ITEM	UNIT PRICE	TOTAL COST
			SUBTOTAL	
			5% SALES TAX	
			TOTAL	

RECEIVED BY:______________________________________

INFORMATION SHEET

B. Daily receiving record

EXAMPLE:

DATE	QUANTITY	UNIT	ITEM	VENDOR	DISTRIBUTION

C. Request for credit memo

EXAMPLE:

DATE____________________ VENDOR____________________________

FACILITY____

INVOICE NUMBER	DELIVERY DATE	QUANTITY	UNIT	ITEM	PROBLEM	UNIT PRICE	TOTAL PRICE

TOTAL CREDIT____________________

BY:____________________________________

INFORMATION SHEET

VI. Reasons for maintaining receiving records

- A. Cost control
- B. Daily operations guide
- C. Basis for future financial planning

VII. Characteristics of receiving records (Class Assignment Sheet #1)

- A. Invoice
  - 1. Vendor prepares
  - 2. Information includes items purchased, quantity, unit price, and total cost of each item
  - 3. Items received and purchase order are checked against information listed
  - 4. Computation of prices, extensions, taxes, and totals is checked
- B. Daily receiving record
  - 1. Buyer's personnel prepares
  - 2. Information includes date received, quantity, item, vendor, and distribution of item

    (NOTE: Items received are recorded in ledger form, verifying only that items were received, on what date, and distribution.)
- C. Request for credit memo
  - 1. Buyer's personnel prepares
  - 2. Information includes invoice number, delivery date, item, problem, unit price, total cost of each item, vendor, date, and signature of preparer
  - 3. Buyer retains a copy

VIII. Essentials of dry storage areas (Clinical Assignment Sheet #2)

- A. Location — As close to receiving area as possible, but convenient to preparation areas
- B. Size — Depends on frequency of deliveries and form of food purchased

  EXAMPLES: Daily delivery requires little storage space; less space is required for storage of instant mashed potatoes than for fresh potatoes.

INFORMATION SHEET

C. Physical conditions

1. Between 50°F and 70°F
2. Well ventilated
3. Moistureproof, with easily cleaned walls
4. Windows with screens and security grates
5. Doors and aisles wide enough for easy movement of carts or hand trucks
6. Divided area for various items

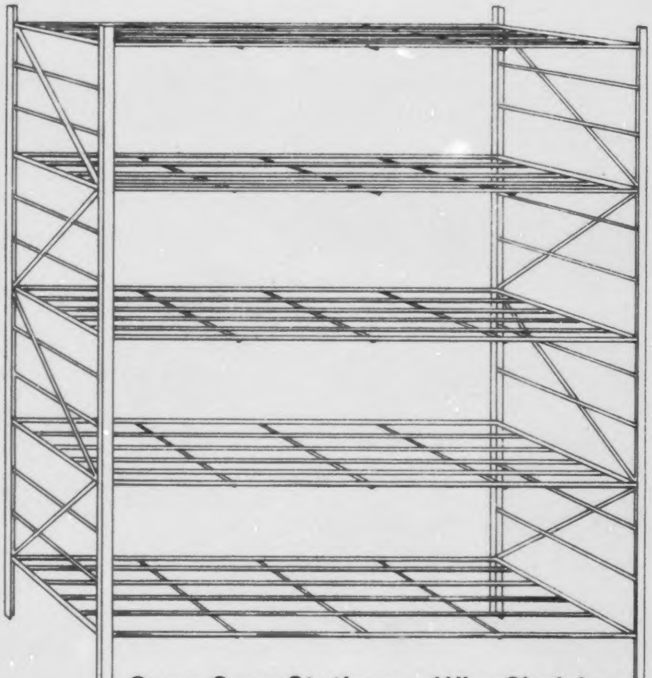
   EXAMPLE: Separate areas for groceries, cleaning supplies, disposable products, linen, extra china

D. Equipment (Figures 5-9)

1. Shelving

   EXAMPLES:

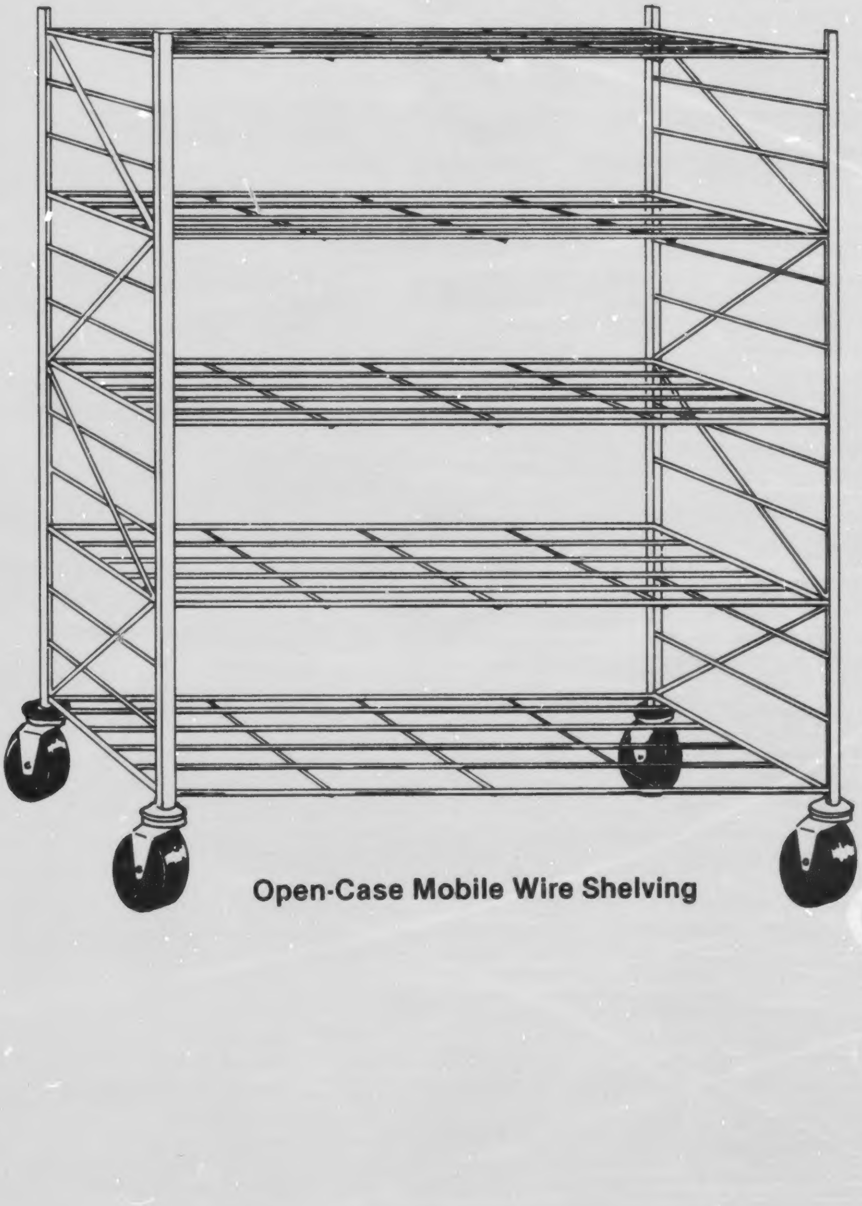
FIGURE 5



Open-Case Stationary Wire Shelving

INFORMATION SHEET

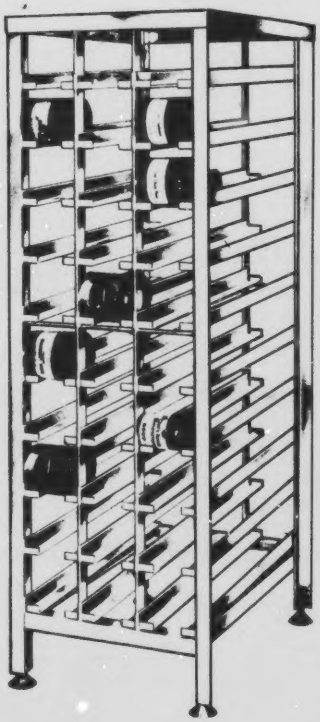
FIGURE 6



Open-Case Mobile Wire Shelving

INFORMATION SHEET

FIGURE 7

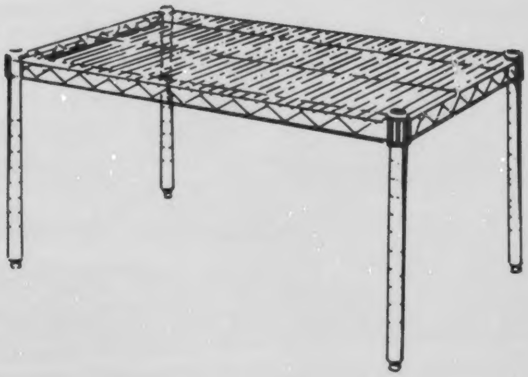


Can Rack

2. Pallets

EXAMPLE:

FIGURE 8

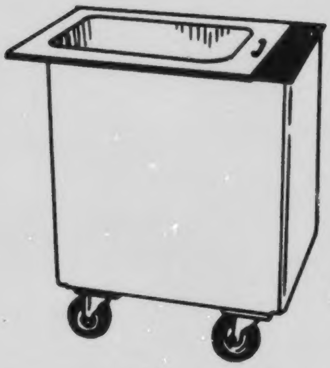


INFORMATION SHEET

3. Storage bins

EXAMPLE:

FIGURE 9



IX. Essentials of refrigerator and freezer storage areas (Clinical Assignment Sheet #2)

A. Location — As close to receiving areas as possible, but convenient to preparation areas

B. Size — Depends on frequency of deliveries and form of food purchased

C. Physical conditions

1. Easy-to-clean interior and exterior

2. Rustproof slatted shelves or racks

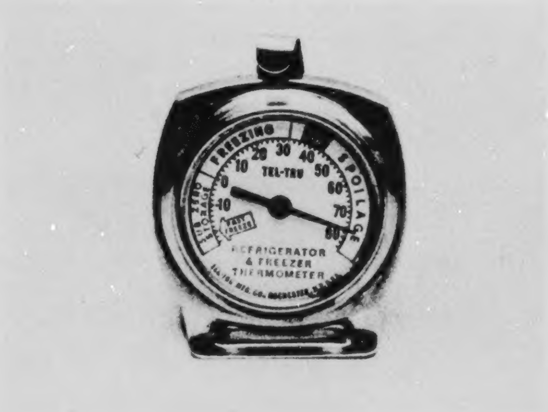
INFORMATION SHEET

D. Equipment — Thermometer (Figure 10)

(NOTE: The thermometer may be built into the exterior of the unit; however, one must still be kept inside the unit.)

EXAMPLE:

FIGURE 10


FREEZING
SPOILAGE
TEL-TRU
-10
0
10
20
30
40
50
60
70
80
REFRIGERATOR
& FREEZER
THERMOMETER

E. Safety

1. Guards around light bulbs
2. Door can be opened from inside

X. Temperature ranges for refrigerator and freezer storage

A. Fruits and vegetables (except those requiring dry storage) — 40°F to 45°F (4°C to 7°C)

B. Dairy products, eggs, meat, fish, poultry, and shellfish — 32°F to 40°F (0°C to 4°C)

INFORMATION SHEET

C. Frozen foods — −10°F to 0°F (−23°C to −16°C)

EXAMPLE:

RECOMMENDED STORAGE TEMPERATURES AND TIMES

Food	Refrigerator Storage	Freezer Storage	Dry Storage
MEAT			
Roasts, Steaks, Chops	3-5 days	Beef and lamb: 9-12 months Pork: 6-9 months Veal: 4-6 months Sausage, ham, and slab bacon: 1-3 months Beef liver: 3-4 months Pork liver: 1-2 months	No
Ground meat, stew meat	1-2 days	6-8 months	
Ham, not canned	1-3 weeks	1-3 months	
Hams, canned	1 year	Not recommended	
POULTRY			
Chicken, turkey, and so forth	2-3 days	Chicken: 6-8 months Turkey: 4-5 months Giblets: 2-3 months	
FISH or **SHELLFISH**	30°F - 32°F (-1°C — 0°C) on ice, 2-3 days	3-6 months	
EGGS			
Shell	1-2 weeks	Not recommended	
Frozen	1-2 days after thawing	9 months	
Dried	6 months	Not recommended	
FRUITS & VEGETABLES			
Fresh	5-7 days	Not recommended	No
Frozen	—	10-12 months	12 months
Canned	—	Not recommended	2 weeks
Dried	Preferred	Not recommended	
CEREAL PRODUCTS			
Regular cornmeal, whole wheat flour	Required over 60 days	Not recommended	2 months
Degermed cornmeal, all-purpose and bread flour, rice, and so forth	Preferred	Not recommended	Satisfactory

INFORMATION SHEET

XI. Measures for security of storage areas

- A. Keep storeroom locked when authorized personnel are away

  EXAMPLE: Lock storeroom during in-service classes.

- B. Check temperatures of refrigerators and freezers daily
- C. Check production sheets frequently
- D. Check inventory frequently

XII. Purpose of inventory — Control of usage, waste, and cost of food and supplies

XIII. Types of inventories (Class Assignment Sheet #2)

- A. Physical inventory

ITEM	UNIT	ON HAND	UNIT COST	TOTAL COST

(NOTE: The physical inventory may be done on a daily, weekly, monthly, or quarterly basis.)

- B. Perpetual inventory

<table>
<tr><td colspan="5">ITEM:</td><td colspan="3">MINIMUM:
MAXIMUM:</td></tr>
<tr><td rowspan="2">DATE</td><td rowspan="2">COMPANY & BRAND</td><td colspan="3">PRICE</td><td rowspan="2">NO. REC'D</td><td rowspan="2">NO. ISSUED</td><td rowspan="2">BALANCE ON HAND</td></tr>
<tr><td colspan="2">PER</td><td>UNIT</td></tr>
<tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr>
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SUPERVISION OF RECEIVING AND STORAGE
UNIT III

CLASS ASSIGNMENT SHEET #1 — COMPLETE A DAILY RECEIVING RECORD AND REQUEST FOR CREDIT MEMO

NAME ______________________ SCORE ____________

For each item received, it is important to know when it was received, condition of item, quantity ordered, and quantity received. Institutions use various receiving records; however, most records will have some information in common. Complete the records below using the following invoice and information.

INVOICE: #3751
DATE: 10/14/8-
DELIVERED TO: Somewhere Hospital

Taft Company
1741 E. Finch St.
Somewhere, State

QUANTITY	UNIT	ITEM	UNIT PRICE	TOTAL COST
2	lug	Thompson seedless grapes	$ 6.48	$ 12.96
2	100# sack	Russet potatoes — #2 bakers	41.03	82.06
6	flat	Tomatoes	9.11	54.66
1	case	Bananas — petite	11.82	11.82
8	bunch	Parsley	.76	6.08
2	carton	Lettuce — iceburg	8.64	17.28
			SUBTOTAL	$184.86
			5% SALES TAX	9.24
			TOTAL	$194.10

RECEIVED BY: ______________________

A. When the order was received, there were only 4 flats of tomatoes, and only 7 bunches of parsley; 1 lug of grapes was mashed. Correct the invoice shown above before signing.

CLASS ASSIGNMENT SHEET #1

B. Complete the daily receiving record, using the invoice and information in Part A of this assignment sheet.

DATE	QUANTITY	UNIT	ITEM	VENDOR	DISTRIBUTION

C. Complete the request for credit memo, using the invoice and information in Part A of this assignment sheet.

INVOICE NUMBER	DELIVERY DATE	QUANTITY	UNIT	ITEM	PROBLEM	UNIT PRICE	TOTAL PRICE

TOTAL CREDIT____________________

BY:______________________________________

SUPERVISION OF RECEIVING AND STORAGE
UNIT III

CLASS ASSIGNMENT SHEET #2 — COMPLETE A PERPETUAL INVENTORY

NAME ____ SCORE ________________

It is important to know what supplies you have on hand and how much of each. Each institution's perpetual inventory form will be different; however, they will have some information in common. Complete the perpetual inventory form below, using the following information.

Green beans — French style

Minimum on hand 10 cases
Maximum on hand 50 cases

Disbursements:		
	2/4	3
	2/5	1
	2/10	12
	2/16	9

February 1 — 22 cases on hand from Taft Co., Triple A brand, at a cost of $13.49 per case

Orders received: 2/7, 30 cases from Trucker Co., Green Lake brand, at a cost of $11.73 per case

Complete the perpetual inventory form below.

ITEM:
MINIMUM:
MAXIMUM:

DATE	COMPANY & BRAND	PRICE			NO. REC'D	NO. ISSUED	BALANCE ON HAND
		PER		UNIT			

SUPERVISION OF RECEIVING AND STORAGE
UNIT III

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

A.

INVOICE: #3751
DATE: 10/14/8-
DELIVERED TO: Somewhere Hospital

Taft Company
1741 E. Finch St.
Somewhere, State

QUANTITY	UNIT	ITEM	UNIT PRICE	TOTAL COST
1	lug	Thompson seedless grapes	$ 6.48	$ 6.48
2	100# sack	Russet potatoes — #2 bakers	41.03	82.06
4	flat	Tomatoes	9.11	36.44
1	case	Bananas — petite	11.82	11.82
7	bunch	Parsley	.76	5.32
2	carton	Lettuce — iceburg	8.64	17.28
			SUBTOTAL	$159.40
			5% SALES TAX	7.97
			TOTAL	$167.37

RECEIVED BY: Student Name

ANSWERS TO CLASS ASSIGNMENT SHEETS

B.

DATE	QUANTITY	UNIT	ITEM	VENDOR	DISTRIBUTION
10/14/8-	1	lug	Thompson seedless grapes	Taft	Produce Refrigerator
10/14/8-	2	100# sack	Russet potatoes — #2 bakers	Taft	Produce Refrigerator
10/14/8-	4	flat	Tomatoes	Taft	Produce Refrigerator
10/14/8-	1	case	Bananas — petite	Taft	Produce Storeroom
10/14/8-	7	bunch	Parsley	Taft	Produce Refrigerator
10/14/8-	2	carton	Lettuce — iceburg	Taft	Produce Refrigerator

(NOTE: In departments that have limited refrigerated storage, potatoes may be kept in the dry storage area.)

C.

TO: Taft Company

FROM: Somewhere Hospital DATE: 10/15/8-

Please send us a credit for the following:

INVOICE NUMBER	DELIVERY DATE	QUANTITY	UNIT	ITEM	PROBLEM	UNIT PRICE	TOTAL PRICE
3751	10/14	2	flat	Tomatoes	shorted	$ 9.11	$18.22
3751	10/14	1	bunch	Parsley	shorted	.76	.76
3751	10/14	1	lug	Thompson seedless grapes	mashed	6.48	6.48

TOTAL CREDIT: $25.46

BY: Student Name

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #2

ITEM: Green Beans — French style

MINIMUM: 10 cases
MAXIMUM: 50 cases

ITEM	COMPANY & BRAND	PRICE PER		PRICE UNIT	NO. REC'D	NO. ISSUED	BALANCE ON HAND
2/4/8-	Taft Co., Triple A	13	49	case		3	19
2/5/8-	Taft Co., Triple A	13	49	case		1	18
2/7/8-	Trucker Co., Green Lake	11	73	case	30		48
2/10/8-	Taft Co., Triple A	11	73	case		12	36
2/16/8-	Taft Co., Triple A	11	73	case		6	30
2/16/8-	Trucker Co., Green Lake	11	73	case		3	27

SUPERVISION OF RECEIVING AND STORAGE
UNIT III

CLINICAL ASSIGNMENT SHEET #1 — EVALUATE A FOOD SERVICE RECEIVING AREA

NAME ______________________ SCORE __________

Institutions have different physical layouts for their receiving areas; however, there are a few essentials that should be included in all facilities. Sketch the receiving area for your department. If your institution has central purchasing, sketch this area, too. Evaluate the adequacy of your institution's receiving area by answering the questions on the next page.

A. Sketch your department and/or central receiving areas.

CLINICAL ASSIGNMENT SHEET #1

B. How would you improve the physical layout of the receiving area?

(NOTE: You may wish to sketch suggested improvements in the space provided.)

CLINICAL ASSIGNMENT SHEET #1

C. Is the equipment in the receiving area utilized?____________________

If not, why?____________________

____

____

D. Is there any equipment you would add to increase the efficiency and effectiveness of the receiving area?____________________

If so, what equipment?____________________

____

____

FSS - 153-D

SUPERVISION OF RECEIVING AND STORAGE
UNIT III

CLINICAL ASSIGNMENT SHEET #2 — EVALUATE FOOD SERVICE STORAGE AREAS

NAME ______________________________ SCORE ______________

Institutions have different physical layouts for their storage areas; however, there are a few essentials that should be included in every facility. Sketch the storage area for your department. Evaluate the adequacy of your institution's storage area by answering the questions on the next page.

PART I

A. Sketch your department's dry storage area.

CLINICAL ASSIGNMENT SHEET #2

B. How would you improve the physical layout of the storage area?

(NOTE: You may wish to sketch suggested improvements in the space provided.)

____

____

____

____

____

CLINICAL ASSIGNMENT SHEET #2

C. Is the storage area located so that it is close to the receiving area, but readily accessible to the preparation areas?____________________

D. Are similar items grouped together?____________________

E. Are cleaning supplies stored separately from food?____________________

F. Is the storeroom well ventilated, clean, and between 50°F and 70°F?__________

G. Are items stored on racks and not on the floor?____________________

H. Are aisles and doors wide enough to admit carts?____________________

I. What suggestions would you make to correct any deficiencies?__________

____

____

____

____

PART II

A. Do all refrigerators and freezers have slatted racks or shelves that permit air circulation?____________________

B. Is refrigerator and freezer space adequate?____________________

C. Do all refrigerators and freezers have thermometers?____________________

D. Do refrigerator and freezer doors open from the inside?____________________

Even when locked?____________________

E. Are light bulbs protected by guards?____________________

F. What suggestions would you make to correct any deficiencies?__________

____

____

____

____

____

SUPERVISION OF RECEIVING AND STORAGE
UNIT III

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

SUPERVISION OF RECEIVING AND STORAGE
UNIT III

TEST

NAME ______________________________ SCORE ______________

1. Match terms associated with receiving, storage, and inventory control to their correct definitions. Write the correct numbers in the blanks.

   _____a. Ongoing record of each stock item on hand

   _____b. Supplier of products

   _____c. Outside platform where goods are received and unloaded

   _____d. Delivery slip that accompanies an order

   _____e. Periodic actual count of all stock

   _____f. Destination of items in storage area

   _____g. Form on which buyer notifies vendor of errors or damaged products so that account can be corrected

   _____h. Cost per unit multiplied by amount purchased; used to determine capital invested in inventory

   _____i. Amount of goods issued from storeroom to preparation areas

   1. Vendor
   2. Loading dock
   3. Request for credit memo
   4. Perpetual inventory
   5. Physical inventory
   6. Distribution
   7. Invoice
   8. Disbursements
   9. Extensions

2. List reasons for proper receiving, storage, and inventory control.

   a. ____

   b. ____

   c. ____

   d. ____

3. Describe essentials of a receiving area.

   a. Location — ________________________________

TEST

b. Loading dock

1) ______________________________
____

2) ______________________________
____

3) ______________________________
____

c. Receiving area

1) ______________________________
____

2) ______________________________
____

d. Equipment

1) ______________________________
____

2) ______________________________
____

3) ______________________________
____

4. List elements of a receiving system.

a. ______________________________
b. ______________________________

5. List types of receiving records.

a. ______________________________
b. ______________________________
c. ______________________________

TEST

6. Select from the following list reasons for maintaining receiving records. Write an "X" in the blank before each correct answer.

   ______a. Basis for future financial planning

   ______b. Basis for determining how much stock is stolen

   ______c. Cost control

   ______d. Daily operation guide

   ______e. Basis for costing recipe ingredients

7. Distinguish among characteristics of receiving records. Write an "I" in the blank before characteristics of an Invoice, a "D" in the blank before characteristics of a Daily Receiving Record, and an "R" in the blank before characteristics of a Request for Credit Memo.

   ______a. Buyer's personnel prepares; information includes invoice number, delivery date, item, problem, unit price, total cost of each item, vendor, date, and signature of preparer; buyer retains a copy

   ______b. Vendor prepares; information includes items purchased, quantity, unit price, and total cost of each item; items received and purchase order are checked against information listed; computation of prices, extensions, taxes, and totals is checked

   ______c. Buyer's personnel prepares; information includes date received, quantity, item, vendor, and distribution of item

8. Describe essentials of dry storage areas.

   a. Location — ____

   ____

   b. Size — ____

   ____

   c. Physical conditions — ______________________________

   ____

   ____

   ____

   ____

   ____

TEST

d. Equipment— ______________________________

____

____

9. Describe essentials of refrigerator and freezer storage areas.

a. Location — ______________________________

____

b. Size — ______________________________

____

c. Physical conditions — ______________________________

____

____

d. Equipment — ______________________________

____

e. Safety — ______________________________

____

10. State temperature ranges for refrigerator and freezer storage.

a. Fruits and vegetables (except those requiring dry storage) — __________

b. Dairy products, eggs, meat, fish, poultry, and shellfish — __________

c. Frozen foods — ______________________________

11. Select from the following list measures for security of storage areas. Write an "X" in the blank before each correct answer.

_____a. Keep storeroom locked when authorized personnel are away

_____b. Check refrigerators weekly

_____c. Check production sheets frequently

_____d. Check temperatures of refrigerators and freezers daily

TEST

______e. Check orders occasionally

______f. Check inventory frequently

12. State the purpose of inventory.

____

____

____

13. Name the two types of inventories shown below. Write the correct names in the blanks.

a.____________________Inventory

ITEM	UNIT	ON HAND	UNIT COST	TOTAL COST

b.____________________Inventory

ITEM:						MINIMUM: MAXIMUM:	
DATE	COMPANY & BRAND	PRICE			NO. REC'D	NO. ISSUED	BALANCE ON HAND
		PER		UNIT			

TEST

(NOTE: Test questions 14-17 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

14. Complete a daily receiving record and request for credit memo.

15. Complete a perpetual inventory.

16. Evaluate a food service receiving area.

17. Evaluate food service storage areas.

SUPERVISION OF RECEIVING AND STORAGE
UNIT III

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 383. The point total for questions 1-13 is 158; the point total for questions 14-17 is 225.)

1. (18 points)

   a. 4

   b. 1

   c. 2

   d. 7

   e. 5

   f. 6

   g. 3

   h. 9

   i. 8

2. (4 points)

   a. Safety of food

   b. Sanitation of facilities

   c. Sensible arrangement of food

   d. Security of food and supplies

3. (30 points)

   Description should include the following

   a. Location — Easily accessible from street or highway

   b. Loading dock

      1) Height — Level of standard truck floor above driveway and same level as floor of entrance to building

      2) Width — Minimum of 8 feet

      3) Length — Long enough to accommodate number of trucks that might need to unload at one time

ANSWERS TO TEST

- c. Receiving area
  - 1) Size — Large enough to accommodate quantity of products that might be delivered at one time
  - 2) Space — Large enough to house equipment for receiving
- d. Equipment
  - 1) Platform scales — Accurate scales to weigh meat and other bulk items
  - 2) Hand trucks — Sturdy enough to transport items to storage
  - 3) Desk or shelf — Large enough to hold papers while checking in items

4. (2 points)
   - a. Receiving clerk
   - b. Receiving records

5. (3 points)
   - a. Invoice
   - b. Daily receiving record
   - c. Request for credit memo

6. (10 points)

   a, c, d

7. (9 points)
   - a. R
   - b. I
   - c. D

8. (33 points)

   Description should include the following

   - a. Location — As close to receiving area as possible, but convenient to preparation areas

ANSWERS TO TEST

b. Size — Depends on frequency of deliveries and form of food purchased

c. Physical conditions

    1) Between 50°F and 70°F

    2) Well ventilated

    3) Moistureproof, with easily cleaned walls

    4) Windows with screens and security grates

    5) Doors and aisles wide enough for easy movement of carts or hand trucks

    6) Divided area for various items

d. Equipment

    1) Shelving

    2) Pallets

    3) Storage bins

9. (21 points)

Description should include the following

a. Location — As close to receiving areas as possible, but convenient to preparation areas

b. Size — Depends on frequency of deliveries and form of food purchased

c. Physical conditions

    1) Easy-to-clean interior and exterior

    2) Rustproof slatted shelves or racks

d. Equipment — Thermometer

ANSWERS TO TEST

- e. Safety
  - 1) Guards around light bulbs
  - 2) Door can be opened from inside

10. (9 points)
    - a. 40°F to 45°F (4°C to 7°C)
    - b. 32°F to 40°F (0°C to 4°C)
    - c. −10°F to 0°F (−23°C to −16°C)

11. (12 points)

    a, c, d, f

12. (5 points)

    Control of usage, waste, and cost of food and supplies

13. (2 points)
    - a. Physical inventory
    - b. Perpetual inventory

14. Evaluated to the satisfaction of the class instructor (50 points)

15. Evaluated to the satisfaction of the class instructor (25 points)

16. Evaluated to the satisfaction of the clinical instructor (75 points)

17. Evaluated to the satisfaction of the clinical instructor (75 points)

EQUIPMENT MANAGEMENT
UNIT IV

UNIT OBJECTIVE

After completing this unit, the student should be able to supervise the selection, purchase, and maintenance of equipment in an institutional food service department. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match to their correct definitions terms associated with the management of equipment.
2. Select from a list factors to consider in the selection of equipment for a specific facility.
3. List features to consider in the selection of equipment.
4. Select from a list steps for purchasing inexpensive equipment.
5. Arrange in order steps for purchasing expensive equipment.
6. Distinguish between responsibilities of the manufacturer and responsibilities of the food service supervisor.
7. Select from a list the purposes of equipment records.
8. Identify types of equipment records.
9. List the items to include in equipment files.
10. Arrange in order steps for setting up an energy conservation program.
11. Complete an equipment inventory record.
12. Complete an equipment repair record.
13. Complete a preventive maintenance schedule.
14. Write specifications for a piece of equipment.
15. Complete an energy usage checklist.
16. Evaluate the management of equipment.

EQUIPMENT MANAGEMENT
UNIT IV

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Provide students with objective sheet.

   B. Provide students with information and assignment sheets.

   C. Discuss unit and specific objectives.

   D. Discuss information and assignment sheets.

   E. Develop appropriate learning activities for special needs students.

   F. Have students discuss equipment purchasing procedures used in their facilities.

   G. Compose case studies and let the class decide which piece of equipment should be purchased and why. Several different equipment manufacturers' catalogs would make this activity more interesting and beneficial to the students.

   H. Arrange to attend a bid opening.

   I. Have the class write specifications for two pieces of equipment; then let an equipment manufacturer evaluate the specifications and discuss them with the class.

   J. Have students discuss the energy conservation methods used in their facilities.

   K. Give test.

   L. Reteach if necessary.

II. Instructional materials

   A. Objective sheet

   B. Suggested activities

   C. Information sheet

   D. Class assignment sheets

      1. Class Assignment Sheet #1--Complete an Equipment Inventory Record

      2. Class Assignment Sheet #2--Complete an Equipment Repair Record

      3. Class Assignment Sheet #3--Complete a Preventive Maintenance Schedule

SUGGESTED ACTIVITIES

E. Answers to class assignment sheets

F. Clinical assignment sheets

  1. Clinical Assignment Sheet #1--Write Specifications for a Piece of Equipment
  2. Clinical Assignment Sheet #2--Complete an Energy Usage Checklist
  3. Clinical Assignment Sheet #3--Evaluate the Management of Equipment

G. Answers to clinical assignment sheets

H. Test

I. Answers to test

III. Unit references

A. Mahaffey, Mary J., et al. *Food Service Manual for Health Care Institutions,* 4th ed. Chicago: American Hospital Association, 1981.

B. Stokes, Judy Ford. *Cost-Effective Quality Food Service--An Institutional Guide,* 1st ed. Germantown, Maryland: Aspen Systems Corp., 1979.

C. West, B. B., et al. *Food Service in Institutions,* 5th ed. New York: New York: John Wiley and Sons, Inc., 1977.

EQUIPMENT MANAGEMENT
UNIT IV

INFORMATION SHEET

I. Terms and definitions

   A. Installation--Setting up equipment for use or service

   B. Manufacturer--Person or company that makes equipment

   C. Operator's manual--Descriptive booklet that comes from manufacturer with equipment

      (NOTE: The operator's manual should include operating and maintenance instructions, a parts list, solutions to possible problems that may occur, and service center locations.)

   D. Preventive maintenance--Routine service and repair of equipment to avoid breakdowns and to maintain good working condition

   E. Specifications--Detailed description of a product

   F. Warranty--Written guarantee by the manufacturer that equipment will operate for a specified period of time

II. Factors to consider in the selection of equipment for a specific facility

   A. Type and size of institution

      EXAMPLES: Large hospital, small restaurant

   B. Menu

      EXAMPLES: Fast food, selective cycle menu for patients

   C. Form of food as purchased

      EXAMPLES: Convenience, conventional

   D. Style of service

      EXAMPLES: Table service, bedside service, self-service

   E. Length of serving period

   F. Number and skill of employees

   G. Utilities available

      EXAMPLES: Electrical wiring and circuits; water, sewer, and gas hookups

   H. Budget available

   I. Floor layout and space allotment

   J. Future plans

INFORMATION SHEET

III. Features to consider in the selection of equipment

(NOTE: There are several national nonprofit organizations that establish controls and standards to ensure sanitation and safety of equipment. A few of these are the National Sanitation Foundation [NSF], Underwriter's Laboratory [UL], and American Gas Association [AGA].)

A. Construction

(NOTE: Equipment used in homes usually does not hold up well in commercial kitchens.)

B. Cleanability

(NOTE: Food service employees are reluctant to use equipment that is hard to clean.)

C. Safety

D. Size

EXAMPLE: Should you purchase the 5-quart mixer or the 30-quart mixer?

E. Installation

(NOTE: Consider space allotment and the need for relocation of utilities.)

F. Performance

(NOTE: Many pieces of equipment are versatile enough to perform several functions.)

G. Maintenance

EXAMPLE: Equipment with sealed bearings requires less maintenance.

H. Availability of replacement parts

I. Cost of operation

(NOTE: Information on the energy efficiency of equipment is available from manufacturers and utility companies.)

IV. Steps for purchasing inexpensive equipment

A. Collect all data

EXAMPLES: Manufacturers' catalogs
Brochures
Manufacturers' specifications sheets
Prices

(NOTE: Most vendors will demonstrate equipment before purchase.)

INFORMATION SHEET

B. Compare cost and quality of various models

(NOTE: Compare the cost of a piece of equipment from at least three vendors when possible.)

C. Choose a reputable dealer

(NOTE: Check on vendor's service policies before making a purchase.)

V. Steps for purchasing expensive equipment (Clinical Assignment Sheet #1)

A. Collect all available data

(NOTE: Visits may be made to other institutions to see the equipment in operation.)

B. Write specific specifications

EXAMPLE: Vague specifications

Item number: xx.
Name of item: Cook's table with sink.
Dimensions: 8 feet long, 2 feet 6 inches wide, 3 feet high.
Materials and construction: Top of this table to be made of heavy-gauge stainless steel with semirolled edge and to be furnished with one sink, 18 inches long, 24 inches wide, 12 inches deep, fitted with drain. Sink to be located 3 inches from left end of table. The underside of this table to be reinforced with channel braces. Table to be supported by 4 stainless-steel tubular standards with adjustable feet. Stainless slatted shelf to rest on crossrails 10 inches above floor. Table to be equipped with one drawer, 24 inches long, 22 inches wide, and 5 inches deep. Drawer to be made of heavy stainless steel, reinforced on front facing. All joints of this drawer to be welded, and drawer equipped with ball-bearing drawer slides. This drawer to be fitted with a white metal handle.

PRICE: $ ___________

EXAMPLE: Specific specifications

Item number: xx.
Name of item: Cook's table with work sink.
Dimensions: 8 feet long, 2 feet 6 inches wide, 3 feet high.
Materials and construction: Top of this table to be made of No. 14-gauge, No. 4-grind, No. 302 stainless steel with all edges turned down 1½ inches, semirolled edge. All corners to be full rounded "bull-nose" construction and integral with top. Top of this table to be fitted with one sink, 18 inches long, 24 inches wide, and 12 inches deep, with all corners and intersections fully rounded to a 1-inch radius. All joints to be welded, ground smooth, and polished. Bottom sloped to drain in center. Sink to be located 3 inches from left end of table; 3 inches from each side. Sink to be equipped with 2-inch white metal drain with plug and chain complete.

INFORMATION SHEET

The underside of this tabletop to be properly reinforced and braced with 4-inch No. 14-gauge stainless-steel channel braces welded on. Four tubular leg standards to be welded to these channel cross braces. Standards to be made of seamless stainless-steel tubing 1 5/8 inches outside diameter, crossrails and braces of the same material, fitted and welded together. Resting on these crossrails and braces will be a slatted bar shelf elevated 10 inches above floor. Slats to be made of No. 16 stainless steel, No. 4-grind, welded to 2-inch No. 16 stainless-steel supports. Slats 2 inches wide and bent down at ends and formed to fit over crossrails. Slatted shelf to be built in two removable parts of equal length. Leg standards to be fitted with adjustable inside threaded, stainless-steel, tubular, closed, smooth-finish feet.

Table to be equipped with one drawer, 24 inches long, 22 inches wide, and 5 inches deep. Drawer to be made of No. 16-gauge, No. 4-grind stainless steel throughout, reinforced on front facing with No. 14-gauge, No. 4-grind stainless steel. All joints of this drawer to be welded, ground, and polished. Each drawer to be equipped with nontilting, easy-glide roller-bearing drawer slides, and all metal tracks welded to under side of tabletop.. This drawer to be fitted with a polished white metal pull handle.

PRICE: F.O.B______ $______

Delivery date: not later than ________________

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(NOTE: See *Food Service Supervisor*, Section D, Unit II, "Purchasing," for further information on writing specifications.)

C. Send notices of invitations to bid

D. Receive bids

E. Tabulate bids

F. Compare bids

G. Choose the best-quality equipment for the price

VI. Responsibilities of the manufacturer and responsibilities of the food service supervisor

A. Manufacturer

1. Provide an operator's manual
2. Upon installation, demonstrate and explain to the management proper operation and care of equipment
3. Provide repair service when contacted

   (NOTE: There may be a fee for this service.)

INFORMATION SHEET

B. Food service supervisor

1. Read and understand operator's manual
2. Train personnel to operate equipment properly
3. Write operating procedure for personnel
4. Follow up on preventive maintenance procedures
5. Keep equipment records

VII. Purposes of equipment records

A. Ordering parts

B. Performing equipment inventories

C. Checking warranties

D. Making equipment replacement decisions

E. Monitoring repairs

VIII. Types of equipment records (Class Assignment Sheets #1-#3)

A. Equipment inventory

EQUIPMENT ____________________

LOCATION ____________________

MANUFACTURER'S NAME ____________________

ADDRESS ____________________

YEAR ________ SERIAL # ________ MODEL # ________ MOTOR # ________

CAPACITY ____________________

OPERATION ______ GAS ________ STEAM ATTACHMENTS __________

______ MANUAL ________ ELECTRIC __________

____

____

VENDOR ____________________

PURCHASE DATE __________ NEW OR USED COST __________

INFORMATION SHEET

B. Equipment repair

EQUIPMENT ____________________

LOCATION ____________________

DATE	KIND OF REPAIR	PERFORMED BY	COST

C. Equipment preventive maintenance schedule

(NOTE: The preventive maintenance schedule may be printed on the back of the equipment repair record.)

Equipment	Service Schedule	Last Date of Service											
		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec

IX. Items to include in equipment files

A. Operator's manual

B. Equipment inventory record

C. Equipment repair record

D. Equipment preventive maintenance schedule

INFORMATION SHEET

X. Steps for setting up an energy conservation program (Clinical Assignment Sheet #2)

A. Assess current practices

EXAMPLES: How long are ovens preheated?
Is hot water from the faucet being used when cold water will do?
Are refrigerator doors left open?

B. Plan ways to improve energy conservation

(NOTE: Involve employees in each stage to increase effectiveness.)

C. Implement the program

(NOTE: Employee training is essential to success.)

D. Evaluate the results

(NOTE: An energy conservation checklist would be an excellent tool.)

EQUIPMENT MANAGEMENT
UNIT IV

CLASS ASSIGNMENT SHEET #1--COMPLETE AN EQUIPMENT INVENTORY RECORD

NAME ______________________________ SCORE ______________

It is important to maintain equipment information so that it is readily accessible. Complete the equipment inventory card below using the following information.

River View Hospital purchased a new 20-quart Hiburn floor model electric mixer, model number A-200, on January 6, 198–. Hiburn's world headquarters is in Floy, Ohio 45374. The mixer has three speeds, a 1/3-horsepower motor, grease-packed ball bearings, and 6 feet of three-wire cord. The motor number is 294761, and the motor is a three-phase induction run type. The 198– mixer was purchased new from L and M Kitchen Supply at 309 S. Florida, Riverview, Anystate, for $1,400. The mixer is under warranty for one year, and the serial number is 974826. The mixer is in the bakery area, so a wire whip, a flat beater, a dough hook, a 20-quart bowl, and a 12-quart bowl were also included in the purchase.

EQUIPMENT ______________________________

LOCATION ______________________________

MANUFACTURER'S NAME ______________________________

ADDRESS ______________________________

YEAR __________ SERIAL # __________ MODEL # __________ MOTOR # __________

CAPACITY ______________________________

OPERATION __________ GAS __________ STEAM ATTACHMENTS __________

__________ MANUAL __________ ELECTRIC ____________________

____

____

VENDOR ______________________________

PURCHASE DATE __________ NEW OR USED COST ____________________

EQUIPMENT MANAGEMENT
UNIT IV

CLASS ASSIGMENT SHEET #2--COMPLETE AN EQUIPMENT REPAIR RECORD

NAME ____________________ SCORE ____________

It is important to maintain a record of equipment repairs so that the performance of a piece of equipment can be assessed. Complete the equipment repair card below using the following information.

A 20-quart mixer in the bakery department at River View Hospital was reported as operating only at one speed. When L and M Kitchen Supply cleaned the switch on April 3,198–, the mixer was still under warranty. On July 21,198–, the hospital maintenance men replaced the plug on the mixer cord after the baker broke off one prong. Service calls by hospital maintenance crews are absorbed in the budget, so no individual charges are made. The baker reported the handle that raises and lowers the bowl broken. The Hiburn Company installed a new handle at cost for $34 on November 25, 198–. The hospital maintenance crew welded two wires back on the wire beater on December 7, 198–.

EQUIPMENT ____________________

LOCATION ____________________

DATE	KIND OF REPAIR	PERFORMED BY	COST

EQUIPMENT MANAGEMENT
UNIT IV

CLASS ASSIGNMENT SHEET #3--COMPLETE A PREVENTIVE MAINTENANCE SCHEDULE

NAME ______________________________ SCORE ______________

It is important to maintain equipment so that it can be kept operating. Complete the preventive maintenance schedule on the next page using the following information.

Sunshine Restaurant has a 250-pound ice machine in the beverage station. It should be serviced biannually and was last serviced and inspected on June 8,198–. An electric potato peeler in the vegetable preparation area is serviced once a year and was last serviced on August 19, 198-. On May 10, 198–, the gas broiler was serviced. The operator's manual suggests that it be serviced every six months; however, because the restaurant relies on the broiler almost sixteen hours each day, it is checked every three months. The dishwasher in the clean-up area is serviced monthly. The last service call was on September 14, 198–.

(NOTE: Discretion needs to be used on the part of the food service supervisor, as in this example of the gas broiler.)

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CLASS ASSIGNMENT SHEET #3

Equipment	Service Schedule	Last Date of Service											
		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec

EQUIPMENT MANAGEMENT
UNIT IV

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

EQUIPMENT Mixer--floor type

LOCATION Bakery

MANUFACTURER'S NAME Hiburn Co.

ADDRESS Floy, Ohio 45374

YEAR 198– SERIAL # 974826 MODEL # A-200 MOTOR # 294761

CAPACITY 20 quart

OPERATION ____ GAS ____ STEAM ATTACHMENTS

____ MANUAL ____ ELECTRIC Wire whip, flat beater, dough hook, 20- & 12- quart bowls

VENDOR L and M Kitchen Supply

PURCHASE DATE 1/6/8- NEW OR USED COST $1,400

Class Assignment Sheet #2

EQUIPMENT Mixer--20-quart

LOCATION Bakery

DATE	KIND OF REPAIR	PERFORMED BY	COST
4/3/8–	Speed switch cleaned	L & M Kitchen Supply	--
7/21/8–	Plug replaced	Maintenance	--
11/26/8–	Handle replaced	Hiburn	$ 34.00
12/7/8–	Wire beater welded	Maintenance	--

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #3

Equipment	Service Schedule	Last Date of Service											
		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Ice machine	Biannually						6/8						
Potato peeler	Yearly								8/19				
Gas broiler	Quarterly		2/10			5/10			8/10				
Dishwasher	Monthly	1/14	2/14	3/14	4/14	5/14	6/14	7/14	8/14	9/14			

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EQUIPMENT MANAGEMENT
UNIT IV

CLINICAL ASSIGNMENT SHEET #1--WRITE SPECIFICATIONS FOR A PIECE OF EQUIPMENT

NAME ______________________________ SCORE ______________

Written specifications are necessary to ensure that a piece of equipment meets the size, space, and capability requirements of a department. Specifications also aid the purchaser in buying the desired equipment at the best price through competitive bidding.

Write specifications for a piece of equipment needed in your department. Discuss the specifications with the clinical instructor and an equipment supplier if possible.

EQUIPMENT MANAGEMENT
UNIT IV

CLINICAL ASSIGNMENT SHEET #2--COMPLETE AN ENERGY USAGE CHECKLIST

NAME ______________________________ SCORE ______________

It is important to control costs in all ways. A large operating cost is energy usage. Energy use can be controlled by purchasing energy-efficient equipment and conscientiously practicing energy conservation.

Complete the checklist below after observing your department. Write your answers and comments in the spaces provided.

ENERGY CONSERVATION METHOD	PRACTICED		COMMENTS
	YES	NO	
Is the equipment being preheated just before it is going to be used?			
Is temperature reduced or equipment turned off during slack periods of the day?			
Is full production capacity of equipment used every time it is possible to do so?			
When practical, are ovens fully loaded for each baking cycle?			
Is another load put on right after one has been removed?			
Is the correct size of equipment being used for the cooking operation?			
Is a timer used in baking to prevent opening of oven doors unnecessarily to check on products?			
Are microwave ovens being used properly—not for cooking of large quantities?			
Are thermostats checked periodically?			
Are doors on refrigeration equipment opened infrequently and held open for very short periods of time?			
Do door gaskets fit snugly?			
Is there adequate air circulation around refrigerated foods?			
Is refrigerated or frozen food stored immediately upon arrival from the supplier?			

CLINICAL ASSIGNMENT SHEET #2

ENERGY CONSERVATION METHOD	PRACTICED		COMMENTS
	YES	NO	
Are evaporator coils kept free of excessive frost?			
Are condenser coils kept free of lint, dust, or other obstructions?			
Is refrigeration equipment located in a cool environment or shielded from heat-radiating equipment?			
Is the dishwasher turned on just before needed?			
Is the machine run at peak capacity?			
Is the removal of mineral deposits performed on a regular basis?			
Are hot water pipes insulated?			
Are faucets not leaking?			

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EQUIPMENT MANAGEMENT
UNIT IV

CLINICAL ASSIGNMENT SHEET #3--EVALUATE THE MANAGEMENT OF EQUIPMENT

NAME ______________________________ SCORE ______________

Equipment is an expensive, necessary part of any food service department; therefore, each facility should have procedures established for its purchase, operation, and maintenance.

Evaluate the management of equipment in your department by answering the following questions.

A. Describe the purchasing procedures for expensive equipment in your department.

____

____

____

____

____

B. Are there written procedures for the operation and cleaning of equipment? __________

If so, are they accessible to the employee using the equipment? ______________

C. Is there an equipment file? __________ If so, what is kept in the file? __________

____

____

D. Is the file up-to-date? __________

E. Is the file easily accessible? __________

F. Is energy conservation practiced in your department? __________ If so, describe some of the practices. ______________________________

____

____

G. How can energy conservation in your department be improved? ______________

____

____

____

CLINICAL ASSIGNMENT SHEET #3

H. If energy conservation is not practiced in your department, describe some ways to conserve energy. ____________________

EQUIPMENT MANAGEMENT
UNIT IV

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2--Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3--Evaluated to the satisfaction of the clinical instructor

EQUIPMENT MANAGEMENT
UNIT IV

TEST

NAME ______________________________ SCORE ______________

1. Match to their correct definitions terms associated with the management of equipment. Write the correct numbers in the blanks.

_____a. Routine service and repair of equipment to avoid breakdowns and to maintain good working condition

_____b. Descriptive booklet that comes from manufacturer with equipment

_____c. Detailed description of a product

_____d. Setting up equipment for use or service

_____e. Person or company that makes equipment

_____f. Written guarantee by the manufacturer that equipment will operate for a specified period of time

1. Installation
2. Specifications
3. Warranty
4. Operator's manual
5. Manufacturer
6. Preventive maintenance

2. Select from the following list factors to consider in the selection of equipment for a specific facility. Write an "X" in the blank before each correct answer.

_____a. Length of serving period

_____b. Form of food as purchased

_____c. Number and skill of employees

_____d. Menu

_____e. Color employees prefer

_____f. Type and size of institution

_____g. Style of service

_____h. Administrator's brand preference

_____i. Utilities available

_____j. Budget available

_____k. Future plans

_____l. Price breaks on equipment offered by friends

_____m. Floor layout and space allotment

TEST

3. List five features to consider in the selection of equipment.

   a. ____________________

   b. ____________________

   c. ____________________

   d. ____________________

   e. ____________________

4. Select from the following list steps for purchasing inexpensive equipment. Write an "X" in the blank before each correct answer.

   _____a. Choose a reputable dealer

   _____b. Collect all data

   _____c. Compare detailed specifications and serial numbers

   _____d. Compare cost and quality of various models

   _____e. Check on installation charges

5. Arrange in order the steps for purchasing expensive equipment. Write a "1" before the first step, a "2" before the second step, and so on.

   _____a. Compare bids

   _____b. Write specific specifications

   _____c. Send notices of invitations to bid

   _____d. Receive bids

   _____e. Choose the best-quality equipment for the price

   _____f. Tabulate bids

   _____g. Collect all available data

TEST

6. Distinguish between responsibilities of the manufacturer and responsibilities of the food service supervisor. Write an "M" before responsibilities of the manufacturer, and an "S" before responsibilities of the food service supervisor.

_____a. Provide repair service when contacted

_____b. Write operating procedure for personnel

_____c. Read and understand operator's manual

_____d. Upon installation, demonstrate and explain to the management proper operation and care of equipment

_____e. Provide an operator's manual

_____f. Keep equipment records

_____g. Train personnel to operate equipment properly

_____h. Follow up on preventive maintenance procedures

7. Select from the following list the purposes of equipment records. Write an "X" in the blank before each correct answer.

_____a. Making equipment replacement decisions

_____b. Ordering parts

_____c. Assist in placing blame for failure of equipment

_____d. Checking warranties

_____e. Performing equipment inventories

_____f. Reducing labor costs

_____g. Preventing employees from damaging equipment

_____h. Monitoring repairs

8. Identify types of equipment records. Write the correct answers in the blanks.

Equipment preventive maintenance schedule
Equipment inventory
Equipment repair

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TEST

EQUIPMENT ______________________________

LOCATION ______________________________

DATE	KIND OF REPAIR	PERFORMED BY	COST

a. ______________________________

EQUIPMENT ______________________________

LOCATION ______________________________

MANUFACTURER'S NAME ______________________________

ADDRESS ______________________________

YEAR ________ SERIAL # ________ MODEL # ________ MOTOR # ________

CAPACITY ______________________________

OPERATION ________ GAS ________ STEAM ATTACHMENTS ________

________ MANUAL ________ ELECTRIC ________

____

____

VENDOR ______________________________

PURCHASE DATE ____________ NEW OR USED COST ____________

b. ______________________________

Equipment	Service Schedule	Last Date of Service											
		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec

c. ______________________________

TEST

9. List the items to include in equipment files.

   a. ____________________

   b. ____________________

   c. ____________________

   d. ____________________

10. Arrange in order steps for setting up an energy conservation program. Write a "1" before the first step, a "2" before the second step, and so on.

    _____a. Implement the program

    _____b. Plan ways to improve energy conservation

    _____c. Evaluate the results

    _____d. Assess current practices

(NOTE: Test questions 11-16 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

11. Complete an equipment inventory record.

12. Complete an equipment repair record.

13. Complete a preventive maintenance schedule.

14. Write specifications for a piece of equipment.

15. Complete an energy usage checklist.

16. Evaluate the management of equipment.

EQUIPMENT MANAGEMENT
UNIT IV

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 397. The point total for questions 1-10 is 147; the point total for questions 11-16 is 250.)

1. (12 points)

   a. 6
   b. 4
   c. 2
   d. 1
   e. 5
   f. 3

2. (26 points)

   a, b, c, d, f, g, i, j, k, m

3. (5 points)

   Answer should include any five of the following

   a. Construction
   b. Cleanability
   c. Safety
   d. Size
   e. Installation
   f. Performance
   g. Maintenance
   h. Availability of replacement parts
   i. Cost of operation

4. (10 points)

   a, b, d

ANSWERS TO TEST

5. (28 points)

   a. 6
   b. 2
   c. 3
   d. 4
   e. 7
   f. 5
   g. 1

6. (24 points)

   a. M
   b. S
   c. S
   d. M
   e. M
   f. S
   g. S
   h. S

7. (16 points)

   a, b, d, e, h

8. (6 points)

   a. Equipment repair
   b. Equipment inventory
   c. Equipment preventive maintenance schedule

9. (4 points)

   a. Operator's manual
   b. Equipment inventory record
   c. Equipment repair record
   d. Equipment preventive maintenance schedule

10. (16 points)

   a. 3
   b. 2
   c. 4
   d. 1

ANSWERS TO TEST

11. Evaluated to the satisfaction of the class instructor (25 points)

12. Evaluated to the satisfaction of the class instructor (25 points)

13. Evaluated to the satisfaction of the class instructor (25 points)

14. Evaluated to the satisfaction of the clinical instructor (50 points)

15. Evaluated to the satisfaction of the clinical instructor (50 points)

16. Evaluated to the satisfaction of the clinical instructor (75 points)

SUPERVISION OF FOOD PRODUCTION
UNIT V

UNIT OBJECTIVE

After completing this unit, the student should be able to supervise the preparation of quality food and determine quantities needed. Also, the student should be able to use principles of disaster planning. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match to their correct definitions terms associated with the supervision of foo production.
2. Select from a list the interrelated steps of quality food production.
3. Select from a list factors that influence quantities of food to prepare.
4. Name records that provide a base for forecasting.
5. Select from a list suggestions for ensuring the use of standardized recipes.
6. Select from a list guidelines for quality control.
7. Select from a list methods of controlling waste.
8. State the responsibility of a dietary department during a disaster.
9. Arrange in order the steps in developing an effective disaster plan.
10. Prepare a disaster plan.
11. Evaluate the supervision of food production.
12. Conduct a food acceptance survey.
13. Conduct an inservice class using the disaster plan.

SUPERVISION OF FOOD PRODUCTION
UNIT V

SUGGESTED ACTIVITIES

I. Suggested activities

  A. Order materials to supplement unit.

    1. *Preventing Waste.* Color, 16 mm, 10 minutes, National Educational Media, Inc., 1979. Available from National Education Media, Inc., 15760 Ventura Boulevard, Encino, California 91436.

       (NOTE: This film is also available in 3/4" U-Matic and 1/2" Betamax and VHS Videocassettes, and Super-8 mm Automatic Cartridge system for Fairchild, MPO, Technicolor, and Kodak sound projectors.)

    2. *Hospitals for Disaster.* Color, 16 mm, 27 1/2 minutes, Defense Civil Preparedness Agency, 1975. Available from the Oklahoma State Health Department or the Audio Visual Support Center, U.S. Army, Fort Sill, Oklahoma 73503. Free.

       (NOTE: In this film, a 200 bed hospital unit is shown operating in a school building under a simulated but realistic disaster situation.)

    3. *Price of Survival.* Color, 16 mm, 28 minutes, Defense Civil Preparedness Agency, 1975. Available from the Oklahoma State Health Department or the Audio Visual Support Center, U.S. Army, Fort Sill, Oklahoma 73503. Free.

  B. Provide students with objective sheet.

  C. Provide students with information and assignment sheets.

  D. Discuss unit and specific objectives.

  E. Discuss information and assignment sheets.

  F. Develop appropriate learning activities for special needs students.

  G. Review "Standardized Recipes," Section C, Unit III, and "Production Scheduling and Service," Section C, Unit IX, in *Food Production Worker.*

  H. Review quality standards outlined in Section C, Units IV through VIII of *Food Production Worker.*

  I. Invite someone from the Salvation Army or Red Cross to speak on emergency feeding.

  J. Ask each student to give a brief report on how forecasting is done in their facility.

  K. Give test.

SUGGESTED ACTIVITIES

- L. Reteach if necessary.

II. Instructional materials

- A. Objective sheet
- B. Suggested activities
- C. Information sheet
- D. Class Assignment Sheet #1 — Prepare a Disaster Plan
- E. Answers to class assignment sheet
- F. Clinical assignment sheets
  1. Clinical Assignment Sheet #1 — Evaluate the Supervision of Food Production
  2. Clinical Assignment Sheet #2 — Conduct a Food Acceptance Survey
  3. Clinical Assignment Sheet #3 — Conduct an Inservice Class Using the Disaster Plan
- G. Answers to clinical assignment sheets
- H. Test
- I. Answers to test

III. Unit references

- A. Mahaffey, Mary J., et al. *Food Service Manual for Healthcare Institutions*, 4th ed. Chicago: American Hospital Association, 1981.
- B. Ray, Mary F., and Evelyn J. Lewis. *Exploring Professional Cooking*, 1st ed. Peoria, Illinois: Chas. A. Bennet Co., Inc., 1976.
- C. West, B.B., et al. *Food Service In Institutions*, 5th ed. New York: John Wiley and Sons, Inc., 1977.
- D. Hospital Research and Educational Trust. *Being a Food Service Worker*, 8th ed. Bowie, Maryland: Robert J. Brady Co., 1974.

SUPERVISION OF FOOD PRODUCTION
UNIT V

INFORMATION SHEET

I. Terms and definitions

   A. Food selection prediction — Estimation of percentage of total number to be served who will choose a particular menu item

   B. Forecasting — Estimating amount of food that will be needed

   C. Plate waste — Food that is returned on patient or customer plates

   D. Food acceptance survey — Opinion poll of patients and/or customers to determine their satisfaction with food served

   E. Disaster plan — Written outline of role and procedures for a dietary department during internal or external disasters

   (NOTE: An internal disaster is something that happens within the facility, such as a fire. An external disaster is something that happens outside the facility that affects it, such as a plane crash.)

II. Interrelated steps of quality food production

   A. Determine quantity of food needed

   B. Purchase high quality ingredients

   (NOTE: A lower grade of ingredient may sometimes be used for a specific purpose without affecting the end quality of the product.)

   C. Store and hold food at optimum temperatures

   D. Use standardized recipes and production schedules to prepare food under controlled conditions

   E. Serve food immediately after preparation

III. Factors that influence quantities of food to prepare

   A. Total patient census

   B. Day of week

   C. Weather

   D. Special conferences being held in facility

INFORMATION SHEET

E. Employee payday

F. Holidays

G. Menu combinations

EXAMPLE: Fried chicken might be very popular if the only other menu choice is sauerkraut and weiners, but if fried chicken and roast beef are offered, the patient or customer selection might be more evenly divided.

H. Portion sizes

IV. Records that provide a base for forecasting

A. Run-out time or amount of leftovers

(NOTE: Run-out time or amount of leftovers is usually recorded on the food production sheet from the previous time the item was served.)

B. Food selection prediction

(NOTE: To help determine the food selection prediction, records should be kept on the factors listed in Section III that influence quantities needed.)

EXAMPLE: Patients on regular and soft diets have a choice of hamburgers or roast beef.

Total patient census	200
Total number of patients on regular and soft diets	160
Percentage of patients that chose hamburgers the last time this menu was served	42%
Math	160 × .42 = 67
Number of hamburgers to order	70 (round off number)

C. Food acceptance survey

(NOTE: Food acceptance surveys can be used to determine food preferences as well as to differentiate between the quality of products.)

INFORMATION SHEET

D. Plate waste

EXAMPLE:	Total servings of carrots served	75
	Number of plates checked upon return to dishroom	30
	Number of plates with all or part of carrots returned	8
	Math	8 ÷ 30 = 0.26
	Percentage of plate waste on carrots	26%

V. Suggestions for ensuring the use of standardized recipes

- A. Write in clear, concise words
- B. Write thorough, detailed instructions
- C. Reproduce in suitable size print
- D. Test and check for accuracy
- E. Review essential points of a new recipe with employees
- F. Encourage employees to taste and judge end product
- G. Make recipes readily accessible
- H. Reinforce frequently the importance of using standardized recipes

VI. Guidelines for quality control

- A. Delegate responsibilities to divide production according to the talents and abilities of each worker
- B. Encourage cooperation among workers in each area
- C. Communicate frequently about desired quality of products
- D. Help employees develop a recognition of quality standards

  EXAMPLE: Pictures of the finished product

INFORMATION SHEET

VII. Methods of controlling waste

- A. Prepare new dishes in small quantities
- B. Offer the same menu choices in all serving areas

  EXAMPLES: Patient tray line, cafeteria, coffee shop

- C. Maintain a menu balance between monotony and too much variety
- D. Batch cook
- E. Evaluate leftovers for possible reuse
- F. Store leftovers properly
- G. Rework leftovers into appetizing dishes
- H. Guard against careless peeling and paring
- I. Beware of careless dumping of steam-jacketed kettles

  (NOTE: Several servings of a menu item may be carelessly washed out of kettles.)

- J. Encourage consistent portion control
- K. Use standardized recipes
- L. Use production schedules

VIII. Responsibility of a dietary department during a disaster — To have a disaster plan that sets policies for service of food to meet needs of patients and staff within capabilities of facility

IX. Steps in developing an effective disaster plan

- A. Analyze resources of department, facility, and community
- B. Write plans to include provisions for different situations

  EXAMPLES: All employees are present and all equipment is operating.
  All employees are present and no equipment is operating.
  Few employees are present and all equipment is operating.
  Few employees are present and no equipment is operating.

INFORMATION SHEET

C. Conduct inservice disaster plan training for all employees

(NOTE: The plan must be posted in an accessible place.)

D. Conduct drills periodically to test the plan

E. Revise plan as necessary

(NOTE: Plan should be reviewed quarterly)

SUPERVISION OF FOOD PRODUCTION
UNIT V

CLASS ASSIGNMENT SHEET #1 — PREPARE A DISASTER PLAN

NAME ______________________________ SCORE ____________

To ensure quick action and uninterrupted food service during a disaster, a disaster plan should be formulated before it is needed.

Use the case study below to help you formulate policies and procedures for a real disaster situation.

CASE STUDY

Riverview is an 85 bed hospital in a rural community with a population of 800 friendly citizens and two old grouches. The hospital is situated at the edge of town and affords a marvelous view of the river from patient rooms on the second and third floors. On April 2, the patient census was 53 and included many elderly people, whose diabetes and cardiovascular problems had been complicated by a flu epidemic. Most of the employees are residents of Riverview.

Mrs. Doty, the dietary supervisor, lives two blocks from the hospital next to the school and has worked in dietary sixteen years. Because Mrs. Doty started as a dishwasher, she is proud of her current job, in which she supervises twenty-three employees. She has replaced most of the old kitchen equipment and now has an all-electric kitchen except for one old four-burner gas range, which she plans to replace during the next fiscal year. Mrs. Doty schedules meat, milk, and bread deliveries three times a week from vendors in the capital city seventy miles away. She receives canned goods and paper supplies once a week. The kitchen is well designed and the only thing Mrs. Doty would add is an elevator exclusively for dietary use so that she could get the temperature-controlled tray carts upstairs more quickly.

At 2 A.M. on April 3, a devastating tornado hit Riverview leaving a mile wide swath of total destruction through the middle of town. Many people were left injured and homeless.

The security guard at the hospital picked up Mrs. Doty at 2:30 A.M. She found the hospital intact with only a few windows blown out. Her supervisor informed her that the hospital would be operating on an emergency power supply for an unknown period; therefore, the power would be used only in critical patient treatment areas. The water supply was safe and working. Only four of Mrs. Doty's employees had come to work by 6:00 A.M.

Describe your plan of action for the next three days.

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CLASS ASSIGNMENT SHEET #1

SUPERVISION OF FOOD PRODUCTION
UNIT V

ANSWERS TO CLASS ASSIGNMENT SHEET

(NOTE: The following are suggested points that may be included in the plan of action or a similar plan evaluated to the satisfaction of the class instructor.)

A. Prepare coffee on the gas range and juice to take to the emergency room

B. Plan cold menus for the next three days using foods on hand

C. Use the four employees to prepare the cold breakfast

D. Enlist help and carry packaged foods and disposable dishes in quantity to the patient floors

E. Place an employee on each floor to assemble meals for patients, observing as closely as possible dietary restrictions

F. Place two employees in the cafeteria to serve a similar breakfast

G. Arrange for dry ice to be brought in to keep foods cold

H. Use perishable items first

I. Arrange for extra deliveries if necessary

J. Try to contact other employees or use volunteers

K. Contact the school for help in serving food to the homeless in the community

L. Keep coffee, juices, sandwiches, etc. in the emergency room twenty-four hours to feed staff and rescue workers

FSS - 221-D

SUPERVISION OF FOOD PRODUCTION
UNIT V

CLINICAL ASSIGNMENT SHEET #1 — EVALUATE THE SUPERVISION OF FOOD PRODUCTION

NAME ______________________________ SCORE ____________

The supervision of food production varies among facilities. However, this unit emphasizes some general principles in assuring quality food production. Using these general principles as guidelines, evaluate the supervision of food production in your facility using the questionnaire below.

A. What records are kept to provide a base for forecasting? ____________________

____

B. Are these records used? ________ If not, why? ____________________

____

____

C. Which records does the person in charge of food production find most helpful? _____

____

D. Are standardized recipes used? ________ If not, why? ____________________

____

____

E. How do employees know how much to prepare? ____________________

____

____

F. Do employees recognize quality standards? ________ Are unacceptable items put on the trayline to serve? Never ________ Occasionally ________ Always ________

CLINICAL ASSIGNMENT SHEET #1

G. Are employees involved in determining the quality of products? ________ If so, how?

____

____

H. How would you improve the supervision of food production in your facility? ________

____

____

____

____

I. Are plate waste studies conducted on new items? ________________________

J. Is food wasted? Never ________ Occasionally ________ Always ________

K. Are portion control standards available? ________ If so, are they used? __________

____

L. How would you improve the control of food waste in your department? __________

____

____

____

____

SUPERVISION OF FOOD PRODUCTION
UNIT V

CLINICAL ASSIGNMENT SHEET #2 — CONDUCT A FOOD ACCEPTANCE SURVEY

NAME ______________________ SCORE ____________

Patients are the main reason for operating food service departments in health care facilities. Food acceptance surveys are one way of determining whether patients are satisfied.

Use the questionnaire on the next page, or develop your own, and survey twenty-five patients.

(NOTE: You may have copies made of Part I of the form on the following page. Part II is to be completed by the student.)

CLINICAL ASSIGNMENT SHEET #2

PART I

FOOD SERVICE SURVEY

A. Is your food served at the correct temperature? ____Yes ____No

Comments:____

____

____

B. Considering your diet prescription, is the amount of food you receive sufficient?

____Yes ____No

Comments:____

____

____

C. Are the meats moist and tender? ____Always ____Never ____Occasionally

D. Is there a sufficient choice of meats on the menu? ____Yes ____No

E. Is there a sufficient choice of vegetables on the menu? ____Yes ____No

F. Is there a sufficient choice of salads on the menu? ____Yes ____No

G. Is there a sufficient choice of desserts on the menu? ____Yes ____No

H. Is there a sufficient choice of beverages on the menu? ____Yes ____No

I. What items would you like to see added to the menu? ____________________

____

J. List a few of your favorite items we have prepared. ____________________

____

K. List a few of your least favorite items we have prepared. ____________________

____

L. What kind of diet are you on while in the hospital? ____________________

CLINICAL ASSIGNMENT SHEET #2

PART II

A. Summarize the results of your survey.

(NOTE: A tally of results can be made using a blank survey questionnaire.)

B. Based on the results of the survey, how would you improve food production and service?

FSS - 227-D

SUPERVISION OF FOOD PRODUCTION
UNIT V

CLINICAL ASSIGNMENT SHEET #3 — CONDUCT AN INSERVICE CLASS USING THE DISASTER PLAN

NAME ______________________________ SCORE ______________

A disaster plan is useless if the employees do not know what it is or how to use it. Conduct an inservice class on your facility's disaster plan as assigned by your clinical instructor.

PART I

Write an outline of your inservice presentation.

CLINICAL ASSIGNMENT SHEET #3

PART II

Answer the questions below to evaluate your presentation.

A. Were you adequately prepared?________ How would you improve?________________

____

B. Did you make the class interesting?________ How?________________

____

____

____

C. Did you stay within your time limit?________________

D. Did the class seem to understand your presentation?________________

E. How would you improve your inservice class?________________

____

____

____

____

____

____

____

____

____

____

____

____

____

SUPERVISION OF FOOD PRODUCTION
UNIT V

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

SUPERVISION OF FOOD PRODUCTION
UNIT V

TEST

NAME ______________________________ SCORE ______________

1. Match to their correct definitions terms associated with the supervision of food production. Write the correct numbers in the blanks.

_____a. Opinion poll of patients and/or customers to determine their satisfaction with food served

_____b. Estimation of percentage of total number to be served who will choose a particular menu item

_____c. Written outline of role and procedures for a dietary department during internal or external disasters

_____d. Estimating amount of food that will be needed

_____e. Food that is returned on patient or customer plates

1. Food selection prediction
2. Forecasting
3. Plate waste
4. Food acceptance survey
5. Disaster plan

2. Select from the following list the interrelated steps of quality food production. Write an "X" in the blank before each correct answer.

_____a. Allow each cook to use his or her favorite home recipe

_____b. Purchase high quality ingredients

_____c. Serve food immediately after preparation

_____d. Store and hold food at optimum temperatures

_____e. Cook meat at high temperatures

_____f. Determine quantity of food needed

_____g. Purchase the least expensive ingredients for cost control

_____h. Use standardized recipes and production schedules to prepare food under controlled conditions

TEST

3. Select from the following list factors that influence quantities of food to prepare. Write an "X" in the blank before each correct answer.

_____a. Day of year

_____b. Total patient census

_____c. Amount of food in storeroom

_____d. Form in which food is prepared

_____e. Special conferences being held in facility

_____f. Weather

_____g. Employee payday

_____h. Menu combinations

_____i. Holidays

_____j. Portion sizes

4. Name three records that provide a base for forecasting.

a. ____

b. ____

c. ____

5. Select from the following list suggestions for ensuring the use of standardized recipes. Write an "X" in the blank before each correct answer.

_____a. Stress importance of a good product regardless of whether or not a recipe is used

_____b. Reinforce frequently the importance of using standardized recipes

_____c. Encourage employees to taste and judge end product

_____d. Write in clear, concise words

_____e. Encourage employees to cook their own way

_____f. Reproduce in suitable size print

_____g. Keep recipes in supervisor's office

TEST

______h. Test and check for accuracy

______i. Write thorough, detailed instructions

______j. Review essential points of a new recipe with employees

6. Select from the following list guidelines for quality control. Write an "X" in the blank before each correct answer.

______a. Encourage cooperation among workers in each area

______b. Communicate frequently about desired quality of products

______c. Delegate responsibilities to divide production according to the talents and abilities of each worker

______d. Utilize forecasting

______e. Help employees develop a recognition of quality standards

7. Select from the following list methods of controlling waste. Write an "X" in the blank before each correct answer.

______a. Use production schedules

______b. Do not batch cook

______c. Dispose of all leftovers

______d. Prepare new dishes in small quantities

______e. Serve all patients unseasoned food

______f. Maintain a menu balance between monotony and too much variety

______g. Serve large portions to encourage patients to eat

______h. Encourage consistent portion control

______i. Rework leftovers into appetizing dishes

______j. Offer the same menu choices in all serving areas

______k. Use standardized recipes

______l. Beware of careless dumping of steam-jacketed kettles

______m. Guard against careless peeling and paring

______n. Store leftovers properly

TEST

8. State the responsibility of a dietary department during a disaster.

____

____

____

9. Arrange in order the steps in developing an effective disaster plan. Write a "1" before the first step, a "2" before the second step, and so on.

______a. Conduct inservice disaster plan training for all employees

______b. Write plans to include provisions for different situations

______c. Revise plan as necessary

______d. Analyze resources of department, facility, and community

______e. Conduct drills periodically to test the plan

(NOTE: Test questions 10-13 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

10. Prepare a disaster plan.

11. Evaluate the supervision of food production.

12. Conduct a food acceptance survey.

13. Conduct an inservice class using the disaster plan.

SUPERVISION OF FOOD PRODUCTION
UNIT V

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 357. The point total for questions 1-9 is 132; the point total for questions 10-13 is 225.)

1. (10 points)

   a. 4

   b. 1

   c. 5

   d. 2

   e. 3

2. (15 points)

   b, c, d, f, h

3. (21 points)

   b, e, f, g, h, i, j

4. (3 points)

   Answer should include any three of the following

   a. Run-out time or amount of leftovers

   b. Food selection prediction

   c. Food acceptance survey

   d. Plate waste

5. (21 points)

   b, c, d, f, h, i, j

6. (8 points)

   a, b, c, e

ANSWERS TO TEST

7. (30 points)

   a, d, f, h, i, j, k, l, m, n

8. (4 points)

   To have a disaster plan that sets policies for service of food to meet needs of patients and staff within capabilities of facility

9. (20 points)

   a. 3

   b. 2

   c. 5

   d. 1

   e. 4

10. Evaluated to the satisfaction of the class instructor (25 points)

11. Evaluated to the satisfaction of the clinical instructor (25 points)

12. Evaluated to the satisfaction of the clinical instructor (100 points)

13. Evaluated to the satisfaction of the clinical instructor (75 points)

SUPERVISION OF SERVICE OF FOOD
UNIT VI

UNIT OBJECTIVE

After completing this unit, the student should be able to determine the best food service system for a facility and supervise the quality service of food. This knowledge will be shown by completing the assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with the supervision of service of food to their correct definitions.
2. Select from a list duties of supervisor in service of food.
3. List types of service systems.
4. Select from a list factors that affect choice of a service system.
5. State advantages and disadvantages of different styles of self-service.
6. State advantages and disadvantages of styles of dining room service.
7. Identify styles of tray service.
8. Distinguish among temperature maintenance systems.
9. Match food items to their correct temperature standards.
10. Select from a list procedures to enhance service of food.
11. Select from a list guidelines for scheduling of meals.
12. Evaluate tray service of food.
13. Evaluate the system for temperature maintenance of food during delivery.

SUPERVISION OF SERVICE OF FOOD
UNIT VI

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Order materials to supplement unit — Films

      1. *Rush Hour Service.* Color, 16 mm, 10 minutes, National Educational Media, Inc., 1979. Available from National Educational Media, Inc., 15760 Ventura Boulevard, Encino, California 91436.

      2. *Cafeteria Service.* Color, 16 mm, 10 minutes, National Educational Media, Inc., 1979. Available from National Educational Media, Inc., 15760 Ventura Boulevard, Encino, California 91436.

      3. *Buffet Layout and Service.* Color, 16 mm, 15 minutes, National Educational Media, Inc., 1979. Available from National Educational Media, Inc., 15760 Ventura Boulevard, Encino, California 91436.

      (NOTE: These films are also available in 3/4-inch U-Matic and 1/2-inch Betamax VHS videocassettes, and Super-8 mm automatic cartridge system for Fairchild, MPO, Technicolor, and Kodak sound projectors.)

   B. Provide students with objective sheet.

   C. Discuss unit and specific objectives.

   D. Provide students with information and assignment sheets.

   E. Discuss information and assignment sheets.

   F. Develop appropriate learning activities for special needs students.

   G. Have students role play demonstrating the right and wrong methods of serving food to patients.

   H. Arrange a field trip to an equipment supplier to see the different types of temperature maintenance systems.

   I. Arrange a field trip to a facility in your area that has an uncommon delivery system.

      EXAMPLE: Monorail

   J. Have a guest speaker from a rehabilitation center demonstrate feeding aids.

      EXAMPLES: Plate guards, flatware with built-up handles, rocking knives

SUGGESTED ACTIVITIES

K. Divide the class into two groups. Ask each group to investigate the costs, advantages, and disadvantages of one of the temperature maintenance systems. Have a spokesperson for each group present the information in class at a later date.

L. Give test.

M. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Clinical assignment sheets

1. Clinical Assignment Sheet #1 — Evaluate Tray Service of Food

2. Clinical Assignment Sheet #2 — Evaluate the System for Temperature Maintenance of Food During Delivery

E. Answers to clinical assignment sheets

F. Test

G. Answers to test

III. Unit references

A. *A Guide to Nutrition and Food Service for Nursing Homes and Homes for the Aged.* Rockville, Maryland: U.S. Department of Health, Education, and Welfare, 1975.

B. *Improving Work Methods in Small Hospitals.* Chicago, Illinois: American Hospital Association, 1975.

C. Mahaffey, Mary J., et al. *Food Service Manual for Health Care Institutions,* 4th ed. Chicago: American Hospital Association, 1981.

D. West, B.B., et al. *Food Service in Institutions,* 5th ed. New York City: John Wiley and Sons, Inc., 1977.

SUPERVISION OF SERVICE OF FOOD
UNIT VI

INFORMATION SHEET

I. Terms and definitions

A. Traditional cafeteria — Food service in which patrons follow each other along a food display counter to make their choices and are served by employees

B. Scramble cafeteria — Food service in which patrons go directly to separated counters for various foods and are served by employees

(NOTE: This may also be known as *hollow-square* or *free-flow* cafeteria.)

C. Buffet — Food service in which patrons serve themselves from a food display of numerous food selections

D. Centralized service — Food service in which tray assembly is in a convenient location in or near kitchen

E. Decentralized service — Food service in which food is distributed to outlying areas, with plating of food at that point

F. Palatable temperature — Degree of heat or cold at which foods are agreeable or pleasing to the taste

G. Unitized pellet — One system for maintaining correct temperature of hot food during transport

II. Duties of supervisor in service of food

A. Ensure that patients or customers receive attractive, appetizing meals

(NOTE: Do not forget that food service usually includes employees and guests, as well as patients.)

B. Ensure that foods retain optimum nutritive value

C. Control portion sizes

D. Maintain proper temperature throughout service

(NOTE: The food should be at the proper temperature to control microbial growth and at a palatable temperature for the patient.)

E. Minimize food transport and/or holding time

INFORMATION SHEET

F. Be aware of existing food service systems

G. Be aware of new technology

H. Maintain highest quality standards at reasonable cost

III. Types of service systems

A. Self-service

EXAMPLES: Cafeteria, buffet, machine vended

B. Dining room service

EXAMPLES: Waiter/waitress, family service

C. Tray service

EXAMPLES: Centralized, decentralized

IV. Factors that affect choice of a service system

A. Physical layout of facility

B. Patients' social needs

C. Patients' physical capabilities

D. Type of food production system

E. Skill level of food service personnel

F. Capability for maintaining desired quality standards

EXAMPLES: Entrees will be served to patients at 110°F.
Soups will be served to patients at 130°F.

G. Economic considerations

EXAMPLES: Costs of installing and maintaining system, purchase of special dishes, energy costs

H. Flexibility of system

EXAMPLE: Ability to accommodate changes in food production system, number of meals served, or menu pattern

INFORMATION SHEET

V. Advantages and disadvantages of different styles of self-service

STYLES	ADVANTAGES	DISADVANTAGES
Traditional cafeteria	Standardized portions Speedy, courteous service	Rate of flow of people depends on number of choices or patron familiarity with setup Patrons wait in line
Scramble cafeteria	Patrons usually do not wait in lines Provides speed and flexibility Patron feels less pressure to hurry	Confusing system for first-time patron Need to control number of people that enter at one time
Buffet	Numerous choices	Time must be spent to maintain foods' eye appeal Foods must be able to "stand up" during serving period Difficult to protect foods from patron contamination Reduces portion control
Machine vended	Twenty-four-hour service, seven days a week	Fast turnover and good service needed to ensure safety Impersonal

INFORMATION SHEET

VI. Advantages and disadvantages of styles of dining room service

STYLES	ADVANTAGES	DISADVANTAGES
Waiter/waitress	Improves morale (NOTE: Patients seem to take more pride in their appearance when dining together.) Gives patients exercise Improves communication between patients and dietary staff	Patients must be mobile Requires added personnel
Family style	Improves morale Gives patients exercise Improves communication among patients, and between patients and dietary staff (NOTE: To facilitate communication, several small rooms are preferable to one large room; and tables that seat only four to six are preferred.) Gives patients a sense of independence	Reduces portion control Increases danger of spills or burns Increases possibility of food contamination

VII. Styles of tray service

A. Centralized

1. Food is prepared in central location
2. Trays are assembled in central location
3. Trays are transported from a central location to patients for service
4. Trays are returned to central location for warewashing

INFORMATION SHEET

B. Decentralized

(NOTE: Decentralized service is recommended if trays must travel long distances to the patients.)

1. Food is prepared in central location
2. Food is conveyed to serving pantries on patient floors
3. Trays are assembled in serving pantries
4. Quick or special items may be prepared in serving pantries

   EXAMPLES: Toast or coffee

5. Trays are returned to serving pantries for dismantling, cleaning, and storage
6. Dishware may be washed in area adjacent to serving pantry or in a central location

VIII. Temperature maintenance systems (Clinical Assignment Sheets #1 and #2)

A. Insulated tray

1. Is a lightweight thermal tray
2. Has molded compartments for hot and/or cold food
3. Is covered with insulated, fitted cover
4. Has no external source of heat or refrigeration
5. Needs no specialized carts
6. Requires specially designed china or disposables
7. Maintains temperature approximately thirty minutes

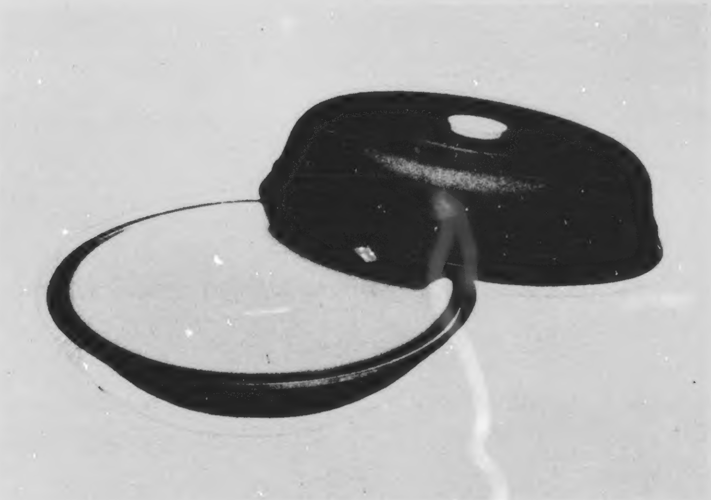
INFORMATION SHEET

B. Unitized pellet (Figure 1)

1. Involves placement of hot food on preheated plate and pellet
2. Is covered with stainless-steel or plastic lid
3. Allows cold food to be placed on tray simultaneously with hot food
4. Does not provide for temperature maintenance of cold food
5. Requires no specialized carts
6. Maintains hot temperature approximately forty-five minutes

EXAMPLE:

FIGURE 1



INFORMATION SHEET

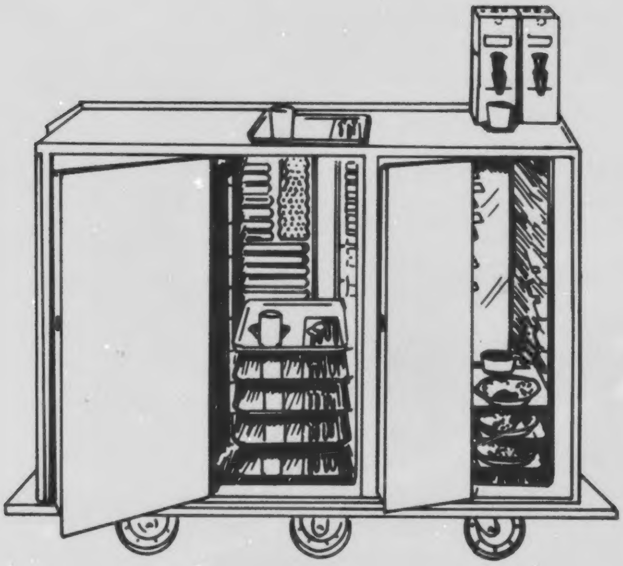
C. Hot/cold cart (Figure 2)

1. Has electrically heated and refrigerated compartments
2. Involves placement of hot and cold foods in separate compartments of cart
3. Requires tray assembly at point of service
4. Requires large area for storage of carts
5. Allows for extended temperature maintenance

(NOTE: These carts are very heavy, but they can be motorized.)

EXAMPLE:

FIGURE 2



INFORMATION SHEET

D. Unitray cart (Figure 3)

1. Has electrically heated and refrigerated compartments

2. Involves placement of hot and cold foods on a divided tray

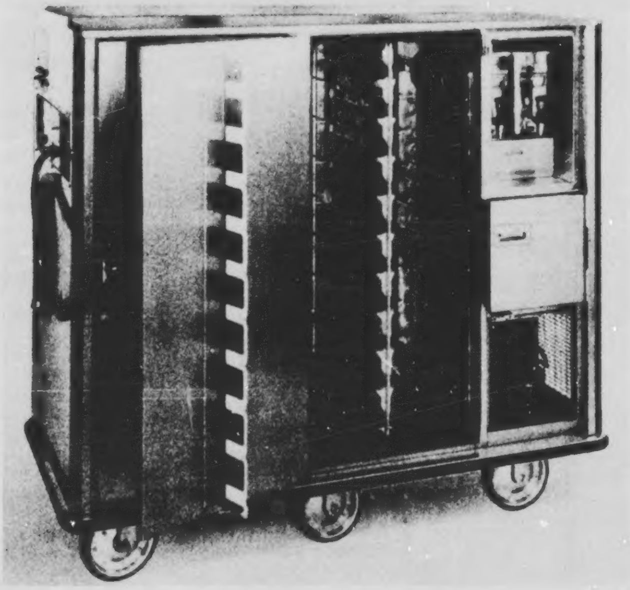
   (NOTE: This tray is divided, so one side is placed in a heated compartment and the other side in a refrigerated compartment.)

3. Requires large area for storage of carts

4. Allows for extended temperature maintenance

EXAMPLE:

FIGURE 3



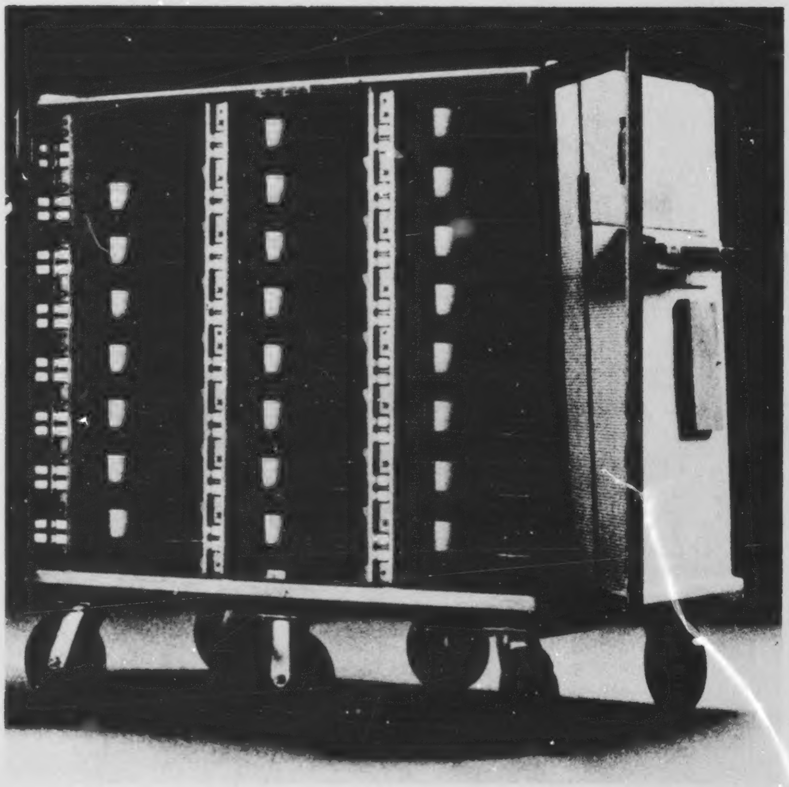
INFORMATION SHEET

E. Tray heater cart (Figure 4)

1. Operates with a rechargeable battery
2. Contains specially designed trays with heaters built in at plate and bowl sites
3. Regulates heating by preset push-button controls
4. Requires specially designed disposable tableware
5. Does not provide for cold temperature maintenance
6. Is a complex system for maintenance
7. Requires large area for storage of carts
8. Allows for extended hot temperature maintenance

EXAMPLE:

FIGURE 4



INFORMATION SHEET

IX. Food items and temperature standards (Clinical Assignment Sheet #2)

FOOD ITEM	SERVING TEMPERATURE, °F	PALATABLE TEMPERATURE, °F
Hot liquids	185	150
Hot cereals	175	150
Soups	180	130
Meats	150	110
Eggs	145	110
Vegetables	160	110
Cold foods	50	65
Cold liquids	36	50

X. Procedures to enhance service of food

- A. Make sure that dining areas are comfortable, quiet, and clean

  (NOTE: Physical surroundings are important even when patients eat in their own rooms.)

- B. Check that patients are seated and ready to receive meal before it is served
- C. Make sure that trays or place settings are functional and attractive
- D. Plan meals around special themes

  (NOTE: This is easily accomplished with centerpieces, tray favors, or colorful tablecloths or tray covers.)

- E. Emphasize that employees should be careful and helpful when serving meals
- F. Solicit patrons' comments and suggestions

XI. Guidelines for scheduling of meals

- A. Meals should be served at regular times
- B. Time span between a substantial evening meal one day and breakfast the following day should not be more than fourteen hours

INFORMATION SHEET

C. Time span between breakfast and substantial evening meal of the same day should not be less than ten hours

EXAMPLE: Breakfast at 7:30 A.M., midday meal at 12:30 P.M., and evening meal at 5:30 P.M.

SUPERVISION OF SERVICE OF FOOD
UNIT VI

CLINICAL ASSIGNMENT SHEET #1 — EVALUATE TRAY SERVICE OF FOOD

NAME ______________________ SCORE __________

It is important to compare the service of trays for patients to our established standards so that we can identify problems, their sources, and their frequency of occurrence. We can then take corrective action to ensure quality service of food.

PART I

Complete the following charts for at least five trays at two different meals.

MEAL:					DATE:
TRAY #1	TRAY #2	TRAY #3	TRAY #4	TRAY #5	QUALITY STANDARD
					A. Each item correctly placed on tray and arranged for eating convenience
					B. Dishes and/or flatware in good condition
					C. Separate dishes for foods that contain liquid
					D. Neat overall appearance; no spills
					E. All food items specified on menu are present on tray
					F. Food on tray is allowed on patient diet
					G. Utensils needed are provided on tray; no unnecessary items

Comments: ____

____

____

____

CLINICAL ASSIGNMENT SHEET #1

MEAL:					DATE:
TRAY #1	TRAY #2	TRAY #3	TRAY #4	TRAY #5	QUALITY STANDARD
					A. Each item correctly placed on tray and arranged for eating convenience
					B. Dishes and/or flatware in good condition
					C. Separate dishes for foods that contain liquid
					D. Neat overall appearance; no spills
					E. All food items specified on menu are present on tray
					F. Food on tray is allowed on patient diet
					G. Utensils needed are provided on tray; no unnecessary items

Comments: ______________________________

CLINICAL ASSIGNMENT SHEET #1

PART II

Complete the following chart to evaluate the tray service of food.

	Yes	No
Are foods portioned, using utensils or disposable gloves to avoid contamination by employees' hands?		
Is special care used in handling clean dishes and flatware to prevent contamination?		
Are single-use utensils and containers disposed of and not reused?		
Do employees' clothing and personal hygiene meet established standards?		
Are transport containers and carts regularly cleaned and sanitized?		
Is all food covered or enclosed for transport?		
Are portions the proper size?		
Are the proper utensils used for serving? EXAMPLE: Use slotted spoon for juicy vegetables.		
Are garnishes used to enhance the appearance of the plate?		

A. Describe problems in tray service that you observed while completing the chart.

____

____

____

____

B. How would you improve the tray service of food in your facility?

____

____

____

____

SUPERVISION OF SERVICE OF FOOD
UNIT VI

CLINICAL ASSIGNMENT SHEET #2 — EVALUATE THE SYSTEM FOR TEMPERATURE MAINTENANCE OF FOOD DURING DELIVERY

NAME ______________________________ SCORE ______________

The temperature of food should be checked periodically to determine how well the service system and the temperature maintenance system are meeting established quality standards and to determine critical points that one should strive to meet.

PART I

Describe the temperature maintenance system used in your facility.

CLINICAL ASSIGNMENT SHEET #2

PART II

It is important for you to be aware of the capabilities of the temperature maintenance system used in delivering food to patients in your facility. Place several food items, both hot and cold, in your temperature maintenance system. Check temperature of food and record on the following chart at the time intervals specified. Record your comments in the spaces provided.

FOOD ITEM	TEMPERATURE ON STEAM TABLE	TEMPERATURE 5 MINUTES AFTER SERVING	TEMPERATURE 15 MINUTES AFTER SERVING	TEMPERATURE 25 MINUTES AFTER SERVING

COMMENTS: ______________________________

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CLINICAL ASSIGNMENT SHEET #2

PART III

Using a food thermometer and clock, complete the following chart.

(NOTE: A test tray should be used. Never stick the thermometer in a patient's meal.)

FLOOR OR AREA:

TIME FOOD IS PLATED:

TIME FOOD IS SERVED TO PATIENT:

FOOD ITEM	TEMPERATURE ON STEAM TABLE	TEMPERATURE WHEN SERVED TO PATIENT	COMMENTS

PART IV

Answer the following questions to evaluate the temperature maintenance system.

A. Was food at the proper temperature on steam table? ____________________

If not, why? ____________________

____

B. Was temperature maintenance system operated properly? ____________________

EXAMPLES: Plugged into outlet, preheated, turned to proper temperature

C. Describe any unusual or unnecessary delays in serving food. ____________________

____

____

____

CLINICAL ASSIGNMENT SHEET #2

D. Describe any unusual or unnecessary delays in delivering food to patient.

E. How long did it take the food to reach the patient after being plated?

(NOTE: Use the chart in Part II.)

F. Was the food at a palatable temperature when it reached the patient?

List the foods that did not meet the recommended standards for palatable temperatures.

G. List any menu items that do not hold temperature well.

H. What could be done to ensure that the patient always receives meals served at a palatable temperature?

SUPERVISION OF SERVICE OF FOOD
UNIT VI

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

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SUPERVISION OF SERVICE OF FOOD
UNIT VI

TEST

NAME ____ SCORE ________________

1. Match terms associated with the supervision of service of food to their correct definitions. Write the correct numbers in the blanks.

______a. Food service in which patrons serve themselves from a food display of numerous food selections

______b. Food service in which food is distributed to outlying areas, with plating of food at that point

______c. One system for maintaining correct temperature of hot food during transport

______d. Degree of heat or cold at which foods are agreeable or pleasing to the taste

______e. Food service in which tray assembly is in a convenient location in or near kitchen

______f. Food service in which patrons go directly to separated counters for various foods and are served by employees

______g. Food service in which patrons follow each other along a food display counter to make their choices and are served by employees

1. Palatable temperature
2. Decentralized service
3. Buffet
4. Scramble cafeteria
5. Centralized service
6. Traditional cafeteria
7. Unitized pellet

2. Select from the following list duties of supervisor in service of food. Write an "X" in the blank before each correct answer.

______a. Maintain proper temperature throughout service

______b. Maximize food transport and/or holding time

______c. Change food service when a new one is marketed

______d. Control portion sizes

______e. Be aware of new technology

TEST

_____f. Ensure that patients or customers receive attractive, appetizing meals

_____g. Assist in feeding patients

_____h. Be aware of existing food service systems

_____i. Maintain highest quality standards at reasonable cost

_____j. Ensure that foods retain optimum nutritive value

_____k. Ensure that patients get just the foods they want without regard to nutritional content

3. List types of service systems.

a. ____

b. ____

c. ____

4. Select from the following list factors that affect choice of a service system. Write an "X" in the blank before each correct answer.

_____a. Dishes and flatware available

_____b. Flexibility of system

_____c. Physical layout of facility

_____d. Meal serving times

_____e. Type of food production system

_____f. Capability for maintaining desired quality standards

_____g. Economic considerations

_____h. Skill level of nursing personnel

_____i. Patients' social needs

_____j. Patients' physical capabilities

TEST

5. State advantages and disadvantages of different styles of self-service.

STYLES	ADVANTAGES	DISADVANTAGES
Traditional cafeteria	a. ____________________ Speedy, courteous service	Rate of flow of people depends on number of choices or patron familiarity with setup b. ____________________
Scramble cafeteria	Patrons usually do not wait in lines c. ____________________ ____________________ Patron feels less pressure to hurry	Confusing system for first-time patron Need to control number of people that enter at one time
Buffet	Numerous choices	Time must be spent to maintain foods' eye appeal Foods must be able to "stand up" during serving period d. ____________________ ____________________ Reduces portion control
Machine vended	Twenty-four-hour service, seven days a week	Fast turnover and good service needed to ensure safety e. ____________________

TEST

6. State advantages and disadvantages of styles of dining room service.

STYLES	ADVANTAGES	DISADVANTAGES
Waiter/waitress	a. ____________________ Gives patients exercise Improves communication between patients and dietary staff	b. ____________________ Requires added personnel
Family style	Improves morale Gives patients exercise Improves communication among patients, and between patients and dietary staff c. ____________________ ____________________	Reduces portion control Increases danger of spills or burns d. ____________________ ____________________

7. Identify styles of tray service. Write the correct names in the blanks.

Centralized **Decentralized**

a. ______________________________________

1) Food is prepared in central location
2) Food is conveyed to serving pantries on patient floors
3) Trays are assembled in serving pantries
4) Quick or special items may be prepared in serving pantries
5) Trays are returned to serving pantries for dismantling, cleaning, and storage
6) Dishware may be washed in area adjacent to serving pantry or in a central location

TEST

b. ____

1) Food is prepared in central location

2) Trays are assembled in central location

3) Trays are transported from a central location to patients for service

4) Trays are returned to central location for warewashing

8. Distinguish among temperature maintenance systems. Write the correct numbers in the blanks.

______a. Involves placement of hot food on preheated plate and pellet; is covered with stainless-steel or plastic lid; allows cold food to be placed on tray simultaneously with hot food; does not provide for temperature maintenance of cold food; requires no specialized carts; maintains hot temperature approximately forty-five minutes

______b. Is a lightweight thermal tray; has molded compartments for hot and/or cold food; is covered with insulated, fitted cover; has no external source of heat or refrigeration; needs no specialized carts; requires specially designed china or disposables; maintains temperature approximately thirty minutes

______c. Has electrically heated and refrigerated compartments; involves placement of hot and cold foods on a divided tray; requires large area for storage of carts; allows for extended temperature maintenance

______d. Operates with a rechargeable battery; contains specially designed trays with heaters built in at plate and bowl sites; regulates heating by preset push-button controls; requires specially designed disposable tableware; does not provide for cold temperature maintenance; is a complex system for maintenance; requires large area for storage of carts; allows for extended hot temperature maintenance

1. Unitized pellet
2. Unitray cart
3. Hot/cold cart
4. Insulated tray
5. Tray heater cart

TEST

______e. Has electrically heated and refrigerated compartments; involves placement of hot and cold foods in separate compartments of cart; requires tray assembly at point of service; requires large area for storage of carts; allows for extended temperature maintenance

9. Match food items to their correct temperature standards. Write the correct numbers in the blanks.

	SERVING TEMPERATURE, °F	PALATABLE TEMPERATURE, °F
______a.	36	50
______b.	185	150
______c.	160	110
______d.	180	130
______e.	50	65
______f.	150	110
______g.	175	150
______h.	145	110

1. Soups
2. Meats
3. Hot cereals
4. Cold liquids
5. Hot liquids
6. Eggs
7. Vegetables
8. Cold foods

10. Select from the following list procedures to enhance service of food. Write an "X" in the blank before each correct answer.

______a. Make sure that dining areas are comfortable, quiet, and clean

______b. Make sure that trays or place settings are functional and attractive

______c. Emphasize that employees should be careful and helpful when serving meals

______d. Check that patients are seated and ready to receive meal before it is served

______e. Seat all uncongenial residents together

______f. Plan meals around special themes

______g. Set beverages on table one hour before meal time

______h. Solicit patrons' comments and suggestions

TEST

11. Select from the following list guidelines for scheduling of meals. Write an "X" in the blank before each correct answer.

    ______a. Meals should be scheduled for the convenience of the employees

    ______b. Time span between a substantial evening meal one day and breakfast the following day should not be more than fourteen hours

    ______c. Meals should be served at regular times

    ______d. Time span between breakfast and substantial evening meal of the same day should not be less than ten hours

(NOTE: Test questions 12 and 13 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

12. Evaluate tray service of food.

13. Evaluate the system for temperature maintenance of food during delivery.

SUPERVISION OF SERVICE OF FOOD
UNIT VI

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 320. The point total for questions 1-11 is 145; the point total for questions 12 and 13 is 175.)

1. (14 points)

   a. 3

   b. 2

   c. 7

   d. 1

   e. 5

   f. 4

   g. 6

2. (22 points)

   a, d, e, f, h, i, j

3. (3 points)

   a. Self-service

   b. Dining room service

   c. Tray service

4. (20 points)

   b, c, e, f, g, i, j

5. (15 points)

   a. Standardized portions

   b. Patrons wait in line

   c. Provides speed and flexibility

   d. Difficult to protect foods from patron contamination

   e. Impersonal

ANSWERS TO TEST

6. (12 points)
   a. Improves morale
   b. Patients must be mobile
   c. Gives patients a sense of independence
   d. Increases possibility of food contamination

7. (4 points)
   a. Decentralized
   b. Centralized

8. (15 points)

a.	1	d.	5
b.	4	e.	3
c.	2		

9. (16 points)

a.	4	e.	8
b.	5	f.	2
c.	7	g.	3
d.	1	h.	6

10. (16 points)

    a, b, c, d, f, h

11. (8 points)

    b, c, d

12. Evaluated to the satisfaction of the clinical instructor (75 points)

13. Evaluated to the satisfaction of the clinical instructor (100 points)

PRODUCTIVITY
UNIT VII

UNIT OBJECTIVE

After completing this unit, the student should be able to use work improvement methods to improve productivity in a dietary department. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Define *productivity*.
2. Select from a list results of improved productivity.
3. Name types of factors that contribute to worker fatigue.
4. Select from a list essential procedures for improving productivity.
5. Identify methods of study for increasing productivity.
6. Select from a list guidelines for increasing productivity.
7. Select from a list ways to implement changes.
8. Perform a time study.
9. Complete a flow or travel diagram.
10. Implement a method to increase productivity.

PRODUCTIVITY
UNIT VII

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Order materials to supplement unit.

      1. Film — *Increasing Productivity*. Color, 16mm, 14 minutes, National Education Media, Inc., 1979. Available from National Education Media, Inc., 15760 Ventura Boulevard, Encino, California 91436. Rental fee required.

         (NOTE: This film is also available in ¾-inch U-Matic and ½-inch Betamax and VHS videocassettes and in super 8mm automatic cartridge system from Fairchild, MPO, Technicolor, and Kodak sound projectors.)

      2. Recommended additional reading

         a. Brown, R.M. "Estimating Dietary Labor by Use of Work Modules." *Journal of the American Dietetic Association*, Vol. 43, pp. 103-106.

         b. Donaldson, B. "Labor Hours in the Dietary Department." *Journal of the American Dietetic Association*, Vol. 33, (1957), pp. 1239-1243.

         c. Freshwater, J.F., and E.R. Bragg. "Improving Food Service Productivity." *Cornell Hotel and Restaurant Administration Quarterly*, Vol. 15, (1975), pp. 12-18.

         d. Mali, P. *Improving Total Productivity*. New York: John Wiley and Sons, 1978.

         e. Young, S.L. "What's Needed for Productivity Improvement." *Production Engineering*, (1981), pp. 34-37.

         f. Yung, L.S., et al. "Affecting Productivity in Food Service Systems of Nursing Homes." *Journal of the American Dietetic Association*, Vol. 78, (1981), pp. 342-348.

   B. Provide students with objective sheet.

   C. Discuss unit and specific objectives.

   D. Provide students with information and assignment sheets.

   E. Discuss information and assignment sheets.

   F. Develop appropriate learning activities for special needs students.

   G. Review "Work Simplification," Section D, Unit IV, *Food Service Worker*.

SUGGESTED ACTIVITIES

H. Discuss ways of incorporating work simplification into daily thoughts and activities.

EXAMPLE: When making work schedules

I. Use the following "test of numbers" activity to illustrate how work simplification techniques can save time and improve work satisfaction.

1. Aim — To prove that good instructions simplify work and save time

2. Materials

   a. Two copies of numbers (Figure 1 on next page) and a pencil for each participant

   b. A watch for checking time in minutes and seconds

3. Instructions given to participants for first page of numbers

   (NOTE: Set a maximum time of fifteen minutes for completion of the exercise.)

   a. With your pencil, connect the numbers in order, beginning with number 1. This is a timed test, so indicate when you are through, and write your time at the top of your paper.

   b. When you have finished and have written time of completion on your first copy, follow instructions for the second copy.

4. Instructions given to participants for second page of numbers

   (NOTE: Set a maximum time of fifteen minutes for completion of the exercise.)

   a. Draw a line from the top to the bottom of page in the middle of the sheet. It will pass between numbers 15 and 28 at top and between 59 and 48 at bottom of sheet.

   b. Now draw a line crosswise in the middle of the sheet. It will pass between numbers 37 and 7 and between numbers 42 and 36.

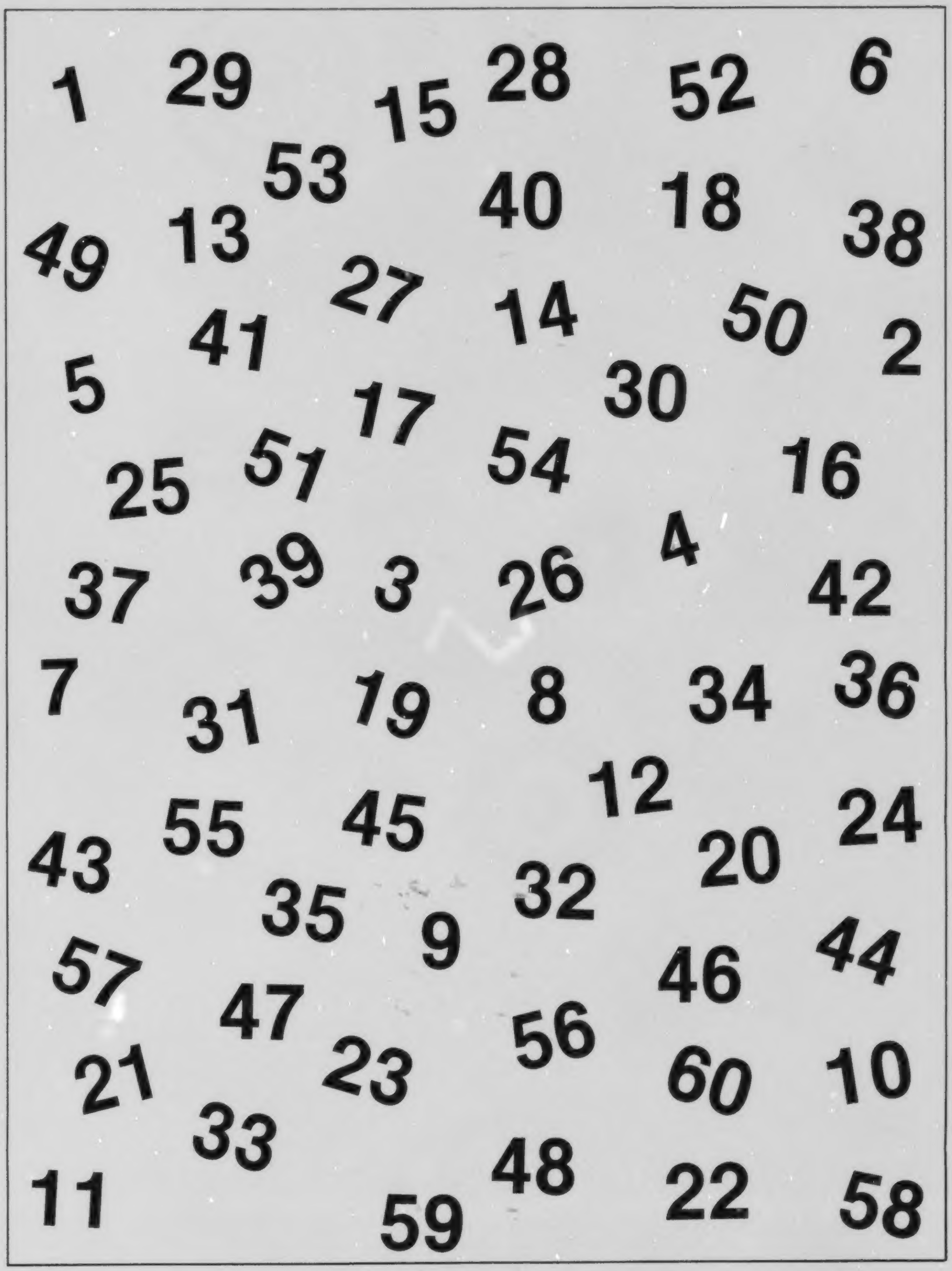
   c. Look at the numbers. All those on the left half of the page are odd numbers, and those on the right half of page are even numbers. Also the numbers are divided into groups of six, with numbers 1 through 6 in the top half, numbers 7 through 12 bottom half, 13 through 18 top, and so on.

   d. Now connect the numbers in order, beginning with number 1. Indicate when you are through. Write the time you finish at the top of page.

   e. Now compare your time with the time it took to complete the first sheet. How much time was saved?

SUGGESTED ACTIVITIES

FIGURE 1


1
29
15
28
52
6
53
40
18
38
49
13
27
14
50
2
41
5
30
17
54
16
25
51
4
37
39
3
26
42
7
31
19
8
34
36
12
55
45
24
43
20
32
35
9
44
57
46
47
56
23
60
10
21
33
48
22
58
11
59

SUGGESTED ACTIVITIES

J. Ask the students to discuss work improvements that have been applied in their facilities.

K. Visit a food service facility to discuss work simplification methods used and methods that could be implemented to increase productivity.

L. Arrange for a guest speaker to talk to the class about productivity.

M. Give test.

N. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Clinical assignment sheets

1. Clinical Assignment Sheet #1 — Perform a Time Study

2. Clinical Assignment Sheet #2 — Complete a Flow or Travel Diagram

3. Clinical Assignment Sheet #3 — Implement a Method to Increase Productivity

E. Answers to clinical assignment sheets

F. Test

G. Answers to test

III. Unit references

A. Close, Guy C., Jr. *Work Improvement*. New York: John Wiley and Sons, Inc., 1960.

B. Knoll, Anne Powell. *Food Service Management: A Human Relations Approach*. New York: Gregg Division, McGraw-Hill Book Company, 1976.

C. Kotschevar, Lendal, H. *Standards, Principles, and Techniques in Quantity Food Production*, 3rd ed. York, Pennsylvania: The Maple Press Company, 1974.

D. Lateiner, Alfred. *Modern Techniques of Supervision*. Stamford, Connecticut: Lateiner Publishing, 1978.

E. West, B.B., et al. *Food Service in Institutions*, 5th ed. New York: John Wiley and Sons, Inc., 1977.

PRODUCTIVITY
UNIT VII

INFORMATION SHEET

I. Productivity — Quality and quantity of work performance

(NOTE: Productivity involves the effective utilization of all resources.)

II. Results of improved productivity (Clinical Assignment Sheet #1)

A. Reduction in the cost of operation

B. Elimination of unnecessary activities

C. Increase in effectiveness of each necessary activity

D. Elimination of duplication of activities

E. Safer, less tiring work

F. Elimination of time, energy, and material waste

G. Improvements in patient service

H. Acceptance of changes

(NOTE: Be sure that changes meet at least one of the other objectives and are not just "changes.")

III. Types of factors that contribute to worker fatigue (Clinical Assignment Sheet #2)

A. Environmental

EXAMPLES: Light, heating, noise, ventilation

(NOTE: These factors are the responsibility of management. All too often, supervisors are quick to criticize low productivity when they have not provided equipment, conditions, or supplies needed.)

B. Psychological

EXAMPLES: Boredom with job, dislike of supervisor, low pay

C. Physical

EXAMPLES: Hours of work, length and locations of rest periods, number of consecutive days of work, traffic flow

INFORMATION SHEET

IV. Essential procedures for improving productivity

A. Incorporate productivity into daily thoughts and activities

(NOTE: Increased productivity is not achieved when productivity is considered as a separate activity.)

B. Develop a questioning attitude

(NOTE: People often become slaves to habit; but to improve productivity, try to look at work with a fresh perspective, and ask why we do things a certain way.)

C. Solicit and use suggestions from employees

(NOTE: Employee interest, understanding, and cooperation are essential to improving productivity. Do not discount the suggestions of new employees; they may be able to look at the work more objectively than those who are used to the routine.)

D. Think through and plan methods of study for increasing productivity

E. Reassure employees of the objectives of the study

(NOTE: It is essential that the employees not feel threatened. If it is necessary to eliminate a position, do not terminate employees, but transfer them to other positions in the department that they have shown an interest in.)

F. Show employees the benefits of changes for workers and management

INFORMATION SHEET

V. Methods of study for increasing productivity (Clinical Assignment Sheets #1 and #2)

  A. Flow or travel diagram (Figure 2)

    1. Requires scale drawing of an area

      (NOTE: The scale is usually ¼ inch = 1 foot.)

    2. Charts the path of worker or material

      (NOTE: A pin or tack may be placed on the drawing at each place the worker stops. A string can trace the path as it is wound around the tacks.)

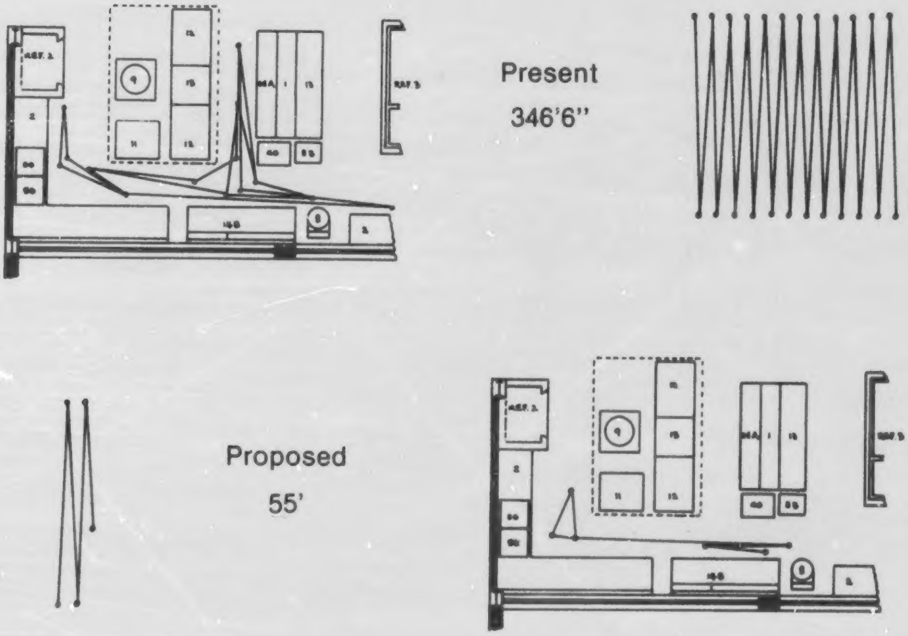
    3. Calculates distance traveled

      (NOTE: On a string chart, the string may be unwound and measured to calculate the distance traveled.)

EXAMPLE:

FIGURE 2

String Chart of a Bakeshop



Source: *Standards, Principles, and Techniques in Quality Food Production*, 3rd ed., by Lendal H. Katschenar.

INFORMATION SHEET

B. Time study

1. Checks the units produced during a set time period

2. May be done by timing a job with a stopwatch

   (NOTE: A time study could be done for the number of trays assembled per minute or for the time required to perform such jobs as dishwashing.)

C. Work sampling

1. Involves random, short, intermittent observations

2. Prevents interrupting employee and thus affecting results

3. Allows observation of several workers at once

EXAMPLE:

Approximate Distance	Time (min)	Description of Operation
6 ft	9:00	Fasten bowl and beater in position on mixer
15 ft	9:01	Go to refrigerator for milk, ground meat, and other weighed recipe ingredients (use cart)
15 ft	9:035	Return to mixer
3 ft	9:04	Place seasonings, eggs, milk, and cut-up bread in mixer bowl
3 ft	9:075	Remove beater and take to wash sink
5 ft	9:085	Lift bowl of meat mixture to low bench near worktable
50 ft	9:09	Assemble portion tools and pans
	9:10	Portion onto pans with number 12 dipper
	9:25	Complete portioning

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INFORMATION SHEET

D. Operations chart

1. Records simple hand movements
2. Fails to consider time factor

EXAMPLE:

Left Hand			Right Hand
Reach for pineapple ring	◦	◦	Reach for dipper
Grasp pineapple ring	○	○	Grasp dipper handle
		◦	Carry dipper to cheese container
Carry pineapple to lettuce cup	◦	○	Fill dipper
Place pineapple on lettuce	○	◦	Carry filled dipper to lettuce cup
Hold pineapple on lettuce	○		
		○	Discharge cheese onto pineapple ring

Small circles denote transportation.
Large circles denote action.

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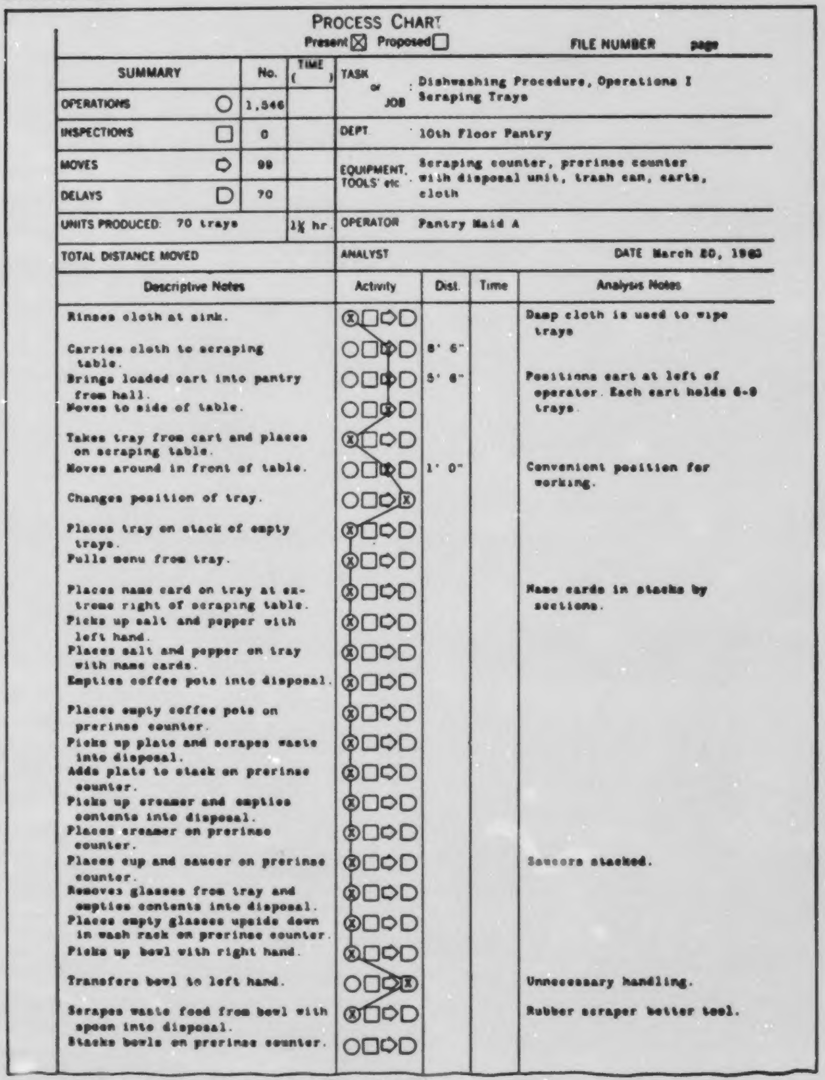
INFORMATION SHEET

E. Flow process chart

1. Shows graphic presentation of separate steps in a job
2. Gives a condensed picture of the gross motions of an entire job (NOTE: Detailed motions are included in the gross motions.)
3. Can follow steps a product goes through or what a person does
4. Allows inclusion of time factor

EXAMPLE:



PROCESS CHART

Present ☒ Proposed ☐ FILE NUMBER page

SUMMARY		No.	TIME ( )
OPERATIONS	○	1,546	
INSPECTIONS	□	0	
MOVES	⇨	99	
DELAYS	D	70	
UNITS PRODUCED: 70 trays			1½ hr.
TOTAL DISTANCE MOVED			

TASK or JOB: Dishwashing Procedure, Operations I Scraping Trays

DEPT: 10th Floor Pantry

EQUIPMENT, TOOLS etc.: Scraping counter, prerinse counter with disposal unit, trash can, carts, cloth

OPERATOR Pantry Maid A

ANALYST

DATE March 20, 1960

Descriptive Notes	Activity	Dist.	Time	Analysis Notes
Rinses cloth at sink.	[✓ ○] □ ⇨ D			Damp cloth is used to wipe trays
Carries cloth to scraping table.	○ □ [✓ ⇨] D	8' 6"		
Brings loaded cart into pantry from hall.	○ □ [✓ ⇨] D	5' 6"		Positions cart at left of operator. Each cart holds 6-9 trays.
Moves to side of table.	○ □ [✓ ⇨] D			
Takes tray from cart and places on scraping table.	[✓ ○] □ ⇨ D			
Moves around in front of table.	○ □ [✓ ⇨] D	1' 0"		Convenient position for working.
Changes position of tray.	○ □ ⇨ [✓ D]			
Places tray on stack of empty trays.	[✓ ○] □ ⇨ D			
Pulls menu from tray.	[✓ ○] □ ⇨ D			
Places name card on tray at extreme right of scraping table.	[✓ ○] □ ⇨ D			Name cards in stacks by sections.
Picks up salt and pepper with left hand.	[✓ ○] □ ⇨ D			
Places salt and pepper on tray with name cards.	[✓ ○] □ ⇨ D			
Empties coffee pots into disposal.	[✓ ○] □ ⇨ D			
Places empty coffee pots on prerinse counter.	[✓ ○] □ ⇨ D			
Picks up plate and scrapes waste into disposal.	[✓ ○] □ ⇨ D			
Adds plate to stack on prerinse counter.	[✓ ○] □ ⇨ D			
Picks up creamer and empties contents into disposal.	[✓ ○] □ ⇨ D			
Places creamer on prerinse counter.	[✓ ○] □ ⇨ D			
Places cup and saucer on prerinse counter.	[✓ ○] □ ⇨ D			Saucers stacked.
Removes glasses from tray and empties contents into disposal.	[✓ ○] □ ⇨ D			
Places empty glasses upside down in wash rack on prerinse counter.	[✓ ○] □ ⇨ D			
Picks up bowl with right hand.	[✓ ○] □ ⇨ D			
Transfers bowl to left hand.	○ □ ⇨ [✓ D]			Unnecessary handling.
Scrapes waste food from bowl with spoon into disposal.	[✓ ○] □ ⇨ D			Rubber scraper better tool.
Stacks bowls on prerinse counter.	○ □ ⇨ D			

Source: Ohio State University, Engineering Department.

INFORMATION SHEET

F. Micromotion study — Photographs movements of a worker

G. Chronocyclegraph--Photographs rapid repetitive motions

(NOTE: Lights are attached to the hands.)

VI. Guidelines for increasing productivity

A. Eliminate unnecessary operations, delays, and moves

EXAMPLE: New processing methods make it unnecessary to soak dried fruits before cooking; however, cooks may continue to do so from habit.

B. Combine jobs

EXAMPLE: Cut a handful of celery stalks on cutting board, instead of one stalk at a time.

C. Change sequence of operations

EXAMPLE: Steam winter squash first so that it is softer and easier to pare.

D. Select multiple-purpose equipment

E. Provide a definite place for each utensil and piece of equipment

EXAMPLE: Avoid time wasted in searching.

F. Reduce transportation time

EXAMPLE: Use mobile carts, or rearrange equipment.

VII. Ways to implement changes (Clinical Assignment Sheet #3)

A. Involve employees in reviewing and checking the proposed change

(NOTE: This practice promotes the concept that the idea is partly theirs so that they will strive to make it successful.)

B. Initiate a trial run

(NOTE: A trial run will help you work out unexpected problems.)

C. Give credit where it is due

D. Follow up and recheck the improved method periodically

E. Be receptive to further improvements in the new method

PRODUCTIVITY
UNIT VII

CLINICAL ASSIGNMENT SHEET #1 — PERFORM A TIME STUDY

NAME ____________________ SCORE __________

Time studies are a measure of work performed. Without measurements, there is little to use as a basis for comparison. This assignment requires that you perform a time study on the tray line in your facility. You may chose breakfast, lunch, or dinner. You will perform your studies for different floors or areas for three days. A regular watch or clock may be used if a stopwatch is not available.

(NOTE: Remember, you are timing the operation, not the individual.)

PART I

Determine the number of trays assembled per minute to evaluate the efficiency of a tray line operation.

Make copies of the chart on the following page to use for each day of your study, or prepare one similar to it that meets your facility's needs.

CLINICAL ASSIGNMENT SHEET #1

AREA	TIME WHEN FIRST TRAY OF AREA IS PUT ON TRAY LINE	TIME WHEN LAST TRAY OF AREA IS PUT ON DELIVERY CART	TOTAL NUMBER OF TRAYS FOR AREA	TRAYS PER MINUTE	COMMENTS

CLINICAL ASSIGNMENT SHEET #1

PART II

The order in which food is placed on trays can affect food temperatures when they reach the patient. Complete the following time study to measure the time it takes for trays to be loaded onto the delivery cart after hot food is placed on them. The results of the time study will provide clues to factors affecting patients' receiving cold food.

TRAY NUMBER	TIME WHEN TRAY IS PUT ON LINE	TIME WHEN HOT FOOD IS PUT ON TRAY	TIME WHEN TRAY IS LOADED ONTO DELIVERY CART	COMMENTS

CLINICAL ASSIGNMENT SHEET #1

PART III

Answer the following questions based on the information gained in Parts I and II.

A. What was the best ratio of trays per minute? ______________________

B. What was the average ratio of trays per minute? ______________________

____

C. What factors make the number of trays per minute differ for various floors?

EXAMPLES: Cardiac floor has more modified diets that require more time; special feeding devices have to be placed on trays for one area.

____

____

____

____

D. What is the average time for a tray to move from the starting point to being put on the delivery cart? ______________________

E. Using the average time, is the tray on the tray line longer before or after the hot food is put on? ______________________

F. Could this time lapse be contributing to patients' receiving cold food?

____

G. Could any work improvement methods be implemented to shorten the time after hot food is put on the tray?______If so, what improvements would you implement?

EXAMPLE: Rearranging equipment or work stations

____

____

____

____

____

____

CLINICAL ASSIGNMENT SHEET #1

H. What delays did you observe that could be avoided? ____________________

____

____

____

I. How would you improve productivity on the tray line? ____________________

____

____

____

____

____

____

____

____

J. How would your changes improve productivity?

(NOTE: Review Section II of the Information Sheet.)

____

____

____

____

PRODUCTIVITY
UNIT VII

CLINICAL ASSIGNMENT SHEET #2 — COMPLETE A FLOW OR TRAVEL DIAGRAM

NAME ______________________________ SCORE ______________

Often one of the easiest ways to increase productivity is to eliminate extra steps. This also has the advantage of reducing worker fatigue.

PART I

Draw the layout of your department. Trace the routes of a head of lettuce and a hamburger patty from delivery to service. Use a blue pencil to trace the route of the lettuce and a red pencil to trace the hamburger's route.

(NOTE: This assignment is designed to help you understand how flow or travel diagrams can improve productivity. If you want to know exactly how many feet of travel were saved by the work improvement, the layout would have to be drawn to scale.)

CLINICAL ASSIGNMENT SHEET #2

PART II

A. Is there unnecessary travel? ______________________________

If so, where? ______________________________

____

____

B. Are there any steps in preparation that can be eliminated?

____

C. How would you improve the work flow? ______________________________

____

____

____

____

____

____

(NOTE: If your improvements involve moving a piece of equipment, redraw the diagram and trace the new travel pattern.)

PRODUCTIVITY
UNIT VII

CLINICAL ASSIGNMENT SHEET #3 — IMPLEMENT A METHOD TO INCREASE PRODUCTIVITY

NAME ______________________________ SCORE ______________

Identify a job or an area in your department in which productivity needs to be improved. Plan and implement a method to increase productivity in the area or job identified.

A. Describe the improved method and how it differs from the previous method.

(NOTE: You may want to implement a change you suggested in Clinical Assignment Sheet #1 or #2.)

B. Describe the benefits to management and employees.

CLINICAL ASSIGNMENT SHEET #3

C. How did you implement the plan? ____________________

D. Were you successful? ____________________

E. How would you improve your technique of implementing the changes?

PRODUCTIVITY
UNIT VII

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

PRODUCTIVITY
UNIT VII

TEST

NAME ______________________________ SCORE ______________

1. Define *productivity.* ______________________________

____

2. Select from the following list results of improved productivity. Write an "X" in the blank before each correct answer.

_____a. Acceptance of changes

_____b. Elimination of duplication of activities

_____c. Increase in cost of operation

_____d. Increase in worker fatigue

_____e. Shortened work day

_____f. Safer, less tiring work

_____g. Improvements in patient service

_____h. Increase in number of employees needed

_____i. Elimination of time, energy, and material waste

_____j. Elimination of unnecessary activities

_____k. Meeting JCAH standards

_____l. Increase in effectiveness of each necessary activity

3. Name types of factors that contribute to worker fatigue.

a. ______________________________

b. ______________________________

c. ______________________________

4. Select from the following list essential procedures for improving productivity. Write an "X" in the blank before each correct answer.

_____a. Encourage unnecessary actions

_____b. Think through and plan methods of study for increasing productivity

TEST

______c. Solicit and use suggestions from employees

______d. Reassure employees of the objectives of the study

______e. Show employees the benefits of changes for workers and management

______f. Approach productivity as a separate activity

______g. Develop a questioning attitude

______h. Avoid telling employees about plans for change

5. Identify methods of study for increasing productivity. Write the correct names in the blanks.

Time study
Flow or travel diagram
Operations chart
Work sampling
Chronocyclegraph
Flow process chart
Micromotion study

a. ____

Photographs movements of a worker

b. ____

Shows graphic presentation of separate steps in a job; gives a condensed picture of the gross motions of an entire job; can follow steps a product goes through or what a person does; allows inclusion of time factor

c. ____

Involves random, short, intermittent observations; prevents interrupting employee and thus affecting results; allows observation of several workers at once

d. ____

Photographs rapid repetitive motions

e. ____

Checks the units produced during a set time period; may be done by timing a job with a stopwatch

f. ____

Requires scale drawing of an area; charts the path of worker or material; calculates distance traveled

TEST

g. ____

Records simple hand movements; fails to consider time factor

6. Select from the following list guidelines for increasing productivity. Write an "X" in the blank before each correct answer.

   _____a. Select multiple-purpose equipment

   _____b. Rearrange equipment frequently

   _____c. Combine jobs

   _____d. Eliminate unnecessary operations, delays, and moves

   _____e. Change sequence of operations

   _____f. Reduce transportation time

   _____g. Provide a definite place for each utensil and piece of equipment

7. Select from the following list ways to implement changes. Write an "X" in the blank before each correct answer.

   _____a. Avoid telling employees until plans are finalized

   _____b. Give credit where it is due

   _____c. Initiate a trial run

   _____d. Follow up and recheck the improved method periodically

   _____e. Be receptive to further improvements in the new method

   _____f. Involve employees in reviewing and checking the proposed change

   _____g. Implement changes frequently so that employees learn to accept changes readily

   _____h. Avoid telling employees the reasons for a change

(NOTE: Test questions 8 - 10 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

8. Perform a time study.

9. Complete a flow or travel diagram.

10. Implement a method to increase productivity.

PRODUCTIVITY
UNIT VII

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The point system in parentheses is intended to be a guideline and should be adapted to meet the needs of each teaching/learning process. The point total for the entire test is 271. The point total for questions 1-7 is 86; the point total for questions 8-10 is 185.)

1. (5 points)

   Productivity — Quality and quantity of work performance

2. (14 points)

   a, b, f, g, i, j, l

3. (16 points)

   a. Environmental

   b. Psychological

   c. Physical

4. (10 points)

   b, c, d, e, g

5. (14 points)

   a. Micromotion study

   b. Flow process chart

   c. Work sampling

   d. Chronocyclegraph

   e. Time study

   f. Flow or travel diagram

   g. Operations chart

ANSWERS TO TEST

6. (12 points)

   a, c, d, e, f, g

7. (15 points)

   b, c, d, e, f

8. Evaluated to the satisfaction of the clinical instructor (75 points)

9. Evaluated to the satisfaction of the clinical instructor (35 points)

10. Evaluated to the satisfaction of the clinical instructor (75 points)

HUMAN RELATIONS SKILLS
UNIT I

UNIT OBJECTIVE

After completing this unit, the student should be able to use human relations skills to improve communications and/or maintain good relationships between departments in a health care facility. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with basic human relations skills to their correct definitions.
2. State reasons why good human relations are important.
3. Select from a list keys to dealing with people.
4. Arrange in order of importance the categories of basic human needs.
5. List personal differences that influence human relations.
6. List areas in which good health care facility relationships are important.
7. Discuss methods of developing good relations with other departments.
8. Select from a list techniques for promoting rapport between patient and employee.
9. List techniques for motivating employees and promoting cooperation and teamwork.
10. List factors that contribute to high morale.
11. State guidelines for a positive attitude toward oneself.
12. Rank employees' needs and desires.
13. Discuss human relations case study.
14. Analyze personal job attitudes.
15. Conduct in-service class on developing a positive self-concept.
16. Observe needs and attitudes of an elderly patient.
17. Evaluate personal ability to use human relations skills.

HUMAN RELATIONS SKILLS
UNIT I

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Order films to supplement unit.

      1. *How to Invest in People.* Available from the National Restaurant Association, One IBM Plaza, Suite 2600, Chicago, Illinois 60611. Rental fee required.

      2. *Time Out for Trouble.* Black and white, 16 mm, 22 minutes. Available from Oklahoma State Department of Health Film Library, P.O. Box 53551, Oklahoma City, Oklahoma 73152.

         (NOTE: This film discusses ways people's actions are influenced by their emotions and the effect of such actions in the field of general behavior and safety.)

      3. *Handling Complaints.* Color, 16 mm, 14 minutes. Available from National Educational Media, Inc., 15760 Ventura Boulevard, Encino, California 91436. Rental fee required; study guide available. Order number B402.

         (NOTE: This film stresses that good relations are not a matter of a person's innate ability to get along with people; good relations are a result of skills that can be learned. A few basic principles can equip anyone to cope with customer complaints and handle any situation cheerfully and graciously.)

   B. Make transparencies.

   C. Provide students with objective sheet.

   D. Provide students with information and assignment sheets.

   E. Discuss unit and specific objectives.

   F. Discuss information and assignment sheets.

   G. Develop appropriate learning activities for special needs students.

   H. Invite a psychologist to discuss human relations with the class.

   I. Have students suggest characteristics of the ideal employee and/or supervisor while you list them on the chalkboard.

   J. Role play a conflict situation and the resolution of the conflict.

      (NOTE: An estimated 24 percent of a manager's time is spent in control of conflict.)

SUGGESTED ACTIVITIES

K. Discuss the value of a smile and simple courtesies such as "please" and "thank you" in changing the emotional climate of a tense situation.

L. Give each student a rubber band. Have students try to push the rubber band across the table or desk. Then have them pull it across the desk. This activity helps to demonstrate that the preferred way of dealing with people is to lead them, not to push them.

M. Have students record how many times they say "I" instead of "we" when they are dealing with others.

N. Give test.

O. Reteach if necessary.

II. Instructional materials

A. Objective sheet

B. Suggested activities

C. Information sheet

D. Transparency masters

1. TM #1 — Maslow's Hierarchy of Needs

2. TM #2 — People Expect Work to Satisfy Needs

E. Class assignment sheets

1. Class Assignment Sheet #1 — Rank Employees' Needs and Desires

2. Class Assignment Sheet #2 — Discuss Human Relations Case Study

3. Class Assignment Sheet #3 — Analyze Personal Job Attitudes

F. Answers to class assignment sheets

G. Clinical assignment sheets

1. Clinical Assignment Sheet #1 — Conduct In-Service Class on Developing a Positive Self-Concept

2. Clinical Assignment Sheet #2 — Observe Needs and Attitudes of an Elderly Patient

3. Clinical Assignment Sheet #3 — Evaluate Personal Ability to Use Human Relations Skills

H. Answers to clinical assignment sheets

I. Test

SUGGESTED ACTIVITIES

J. Answers to test

III. Unit references

A. "Beatitudes for Friends of the Aged." *Oklahoma Observer,* April 25, 1981, p. 11.

B. Grimes, Vici, and Jerald Chesser. *Food Service: Production and Service.* Stillwater, Oklahoma: State Department of Vocational and Technical Education/Curriculum and Instructional Materials Center, 1976.

C. Halloran, Jack. *Applied Human Relations: An Organizational Approach.* Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1978.

D. Knoll, Anne P. *Food Service Management: A Human Relations Approach.* New York: McGraw-Hill Book Company, 1976.

E. Rogers, Helen V., and Ann Benson. *Practical Nursing I,* rev. by Jamee Reid-Sloan. Stillwater, Oklahoma: State Department of Vocational and Technical Education/Curriculum and Instructional Materials Center, 1981.

F. Strauss, George, and Leonard Sayles. *Personnel, The Human Problems of Management,* 4th ed. Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1980.

HUMAN RELATIONS SKILLS
UNIT I

INFORMATION SHEET

I. Terms and definitions

   A. Human relations — Process of getting along with others and learning to accept them as they are

   B. Attitude — Feeling or mood that indicates readiness for activity

   C. Rapport — Relationship between people characterized by harmony, closeness, and understanding

   D. Motivate — To stimulate an active interest in work through meeting needs and appealing to employees' interests

      EXAMPLES: Recognition, contests, salary

   E. Morale — Atmosphere or feeling prevailing in a department or facility

   F. Respect — To show consideration and concern for others

   G. Service — Act of helping or benefiting another by giving of oneself

II. Reasons why good human relations are important

   (NOTE: Ten percent of the average work day is spent on technical problems, and 90 percent is spent with people.)

   A. Result in higher productivity

   B. Produce more interest in work

   C. Achieve better efficiency

   D. Produce low employee turnover

   E. Result in less absenteeism

III. Keys to dealing with people (Class Assignment Sheet #2; Clinical Assignment Sheet #3)

   (NOTE: Daily problems are easier to solve when you are aware of others' needs.)

   A. Give each employee recognition for job well done

   B. Match each employee's needs to the job

INFORMATION SHEET

C. Treat employees fairly and impartially

D. Be sensitive to each individual's feelings

(NOTE: Instructions, directions, and criticisms are likely to be more effective in an atmosphere of goodwill.)

E. Show interest in employees' opinions and/or criticisms

(NOTE: Nothing builds the ego more than being asked to give an opinion.)

F. Keep employees informed

G. Respect each person's point of view, regardless of how much it varies from your own

H. Utilize every opportunity to say something kind and encouraging

(NOTE: Mark Twain said, "I can live three weeks on a compliment." Henry James said, "The greatest human craving is the urge to be appreciated.")

IV. Categories of basic human needs arranged in order of importance (Transparency #1 and #2; Class Assignment Sheet #1)

(NOTE: If you understand basic human needs, you are better able to meet your own needs as well as to relate to the needs of others.)

A. Basic physical needs

EXAMPLES: General — Air, water, food, clothing, shelter

Job related — Salary, health insurance, good work environment

B. Safety or security needs

EXAMPLES: General — Freedom from harm, protection against threat, confidence with the familiar and the known

Job related — Sick pay, job security, safe working conditions, retirement plan

INFORMATION SHEET

C. Social or belonging needs

EXAMPLES: General — Group acceptance, companionship, sense of belonging

Job related — Celebrating birthdays

D. Ego or esteem needs

(NOTE: People who have a good opinion of themselves develop feelings of confidence, capability, and adequacy.)

EXAMPLES: General — Good opinion of self; desire for others to have good opinion of self; recognition, prestige

Job related — Employee of the month award, job title, uniform name tag, bonus, public acknowledgement of job well done

E. Self-fulfillment needs

(NOTE: Self-fulfillment is the realization of one's potential to the fullest. It is also called *self-actualization.*)

EXAMPLES: General — Continued growth, creative work

Job related — Dietetic assistant seminars, promotional system

V. Personal differences that influence human relations

(NOTE: Though humans differ in many respects, the reasons humans behave as they do are very similar.)

A. Intelligence

B. Emotional responses

EXAMPLES: Happiness, aggressiveness, anger

C. Physical responses

EXAMPLES: Stamina, coordination, rate of movement

VI. Areas in which good health care facility relationships are important (Clinical Assignment Sheet #2)

A. In dealing with the public

EXAMPLES: Patients, family members, visitors

INFORMATION SHEET

B. Within the dietary department

(NOTE: Relationships within the dietary department must be good for work to be accomplished efficiently and without error.)

C. Among other departments

(NOTE: The whole facility should work as a team for the care of the patient.)

D. With administration or management

(NOTE: Without good relations with the administration, the dietary department can be "low man on the totem pole.")

E. In dealing with unions

EXAMPLES: Oklahoma Public Employees Association (OPEA), American Federation of Government Employees (AFGE)

VII. Methods of developing good relations with other departments

(NOTE: To provide good care for each patient, all the patient's needs must be met. To accomplish this, there must be several departments in the facility. Each department has its specialty and takes care of a different patient need.)

A. Respect other departments and the individuals in them

B. Practice good manners

(NOTE: Remember to say *please* and *thank you.*)

C. Provide willing cooperation

D. Use good communication skills

(NOTE: Think before you speak, and choose your words carefully.)

E. Use proper chain of communication when dealing with problems

EXAMPLE: Report dirty room to supervisor, not to a housekeeper.

VIII. Techniques for promoting rapport between patient and employee (Clinical Assignment Sheet #2)

A. Treat the patient as you would like to be treated

(NOTE: Put yourself in the patient's place.)

INFORMATION SHEET

B. Use verbal and nonverbal personal contact

(NOTE: The tone of your voice and the touch of your hand can convey your care and concern.)

C. Show empathy for patient and family

D. Speak to patient and family on their level of understanding

(NOTE: You will have better cooperation from patient and family if they understand what you are saying.)

E. Do not become defensive if patient complains about food

(NOTE: Remember that patients no longer have complete control over their lives. They are not familiar with the routine of a health care facility, but they are quite familiar with food and eating. Practice your active listening skills and make friends.)

IX. Techniques for motivating employees and promoting cooperation and teamwork

(NOTE: The basic problem with motivation is how to create a situation in which employees can satisfy their individual needs while working toward the goals of the organization.)

A. Give liberal praise

(NOTE: Praise loudly, but criticize softly.)

B. Practice active listening

(NOTE: Each person in the department needs to develop and use active listening skills.)

C. Encourage employees to exchange ideas and to work together

(NOTE: Help others when your job is done.)

D. Avoid arguments

E. Clear misunderstandings immediately

F. Set fair challenges

G. Encourage each employee to offer opinions and suggestions for improving job and/or department

(NOTE: Be receptive to their ideas.)

INFORMATION SHEET

H. Avoid "cover-up"

(NOTE: Admit errors or mistakes.)

X. Factors that contribute to high morale (Class Assignment Sheet #1)

A. Pride in work

B. Job satisfaction

C. Adequate salary

D. Good working conditions

E. Fringe benefits

F. Awareness of job responsibilities

G. Advance notice of change

H. Fair treatment

I. Fair evaluation of job performance

J. Appreciation for work done

K. Participation in decision making

XI. Guidelines for a positive attitude toward oneself (Class Assignment Sheet #3; Clinical Assignment Sheet #1)

(NOTE: To live by the Golden Rule, you must have a positive attitude toward yourself.)

A. Set personal goals

B. Demand obligations from self

EXAMPLES: Be honest, happy, dependable, truthful

C. Seek self-improvement

EXAMPLES: Appearance, intelligence, control of behavior, professional growth, development

D. Develop self-confidence

E. Evaluate yourself periodically

INFORMATION SHEET

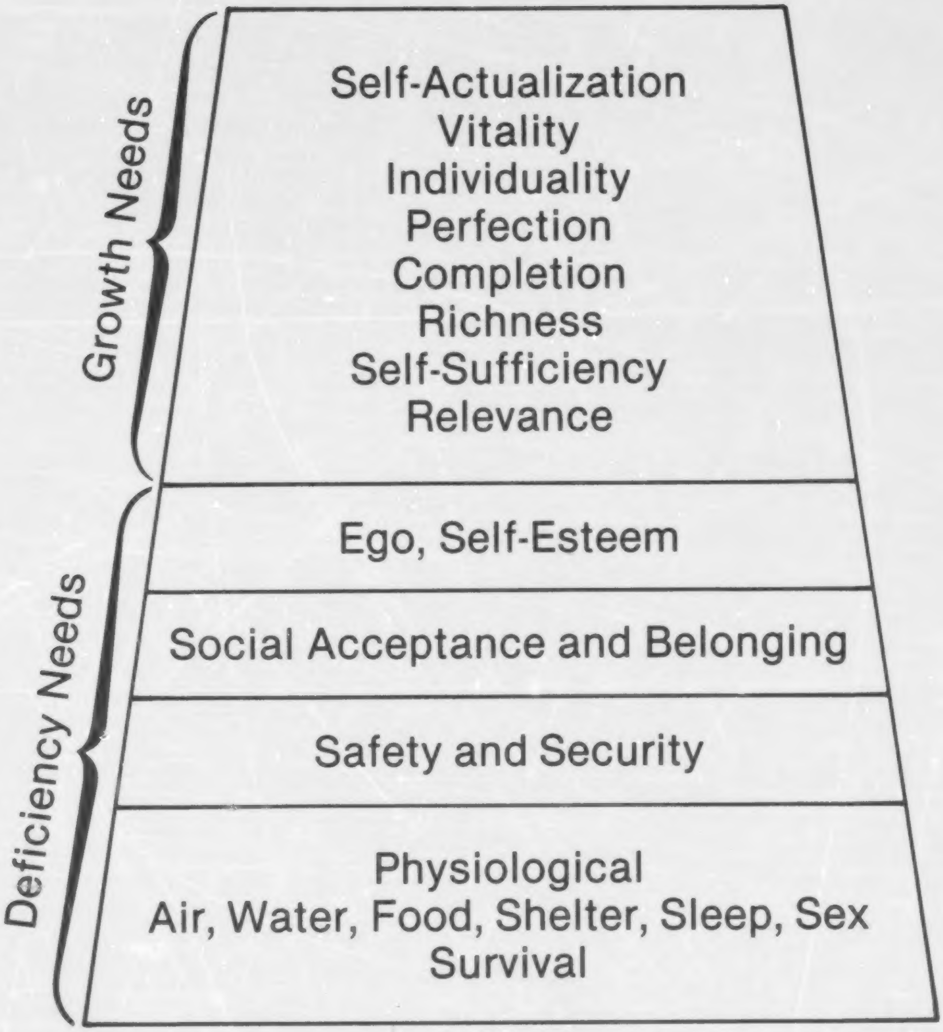
F. Give more than is expected

G. Learn to know yourself

H. Be proud of the person you are

(NOTE: Be proud of yourself, but continue to make improvements.)

Maslow's Hierarchy of Needs



Growth Needs

Self-Actualization
Vitality
Individuality
Perfection
Completion
Richness
Self-Sufficiency
Relevance

Deficiency Needs

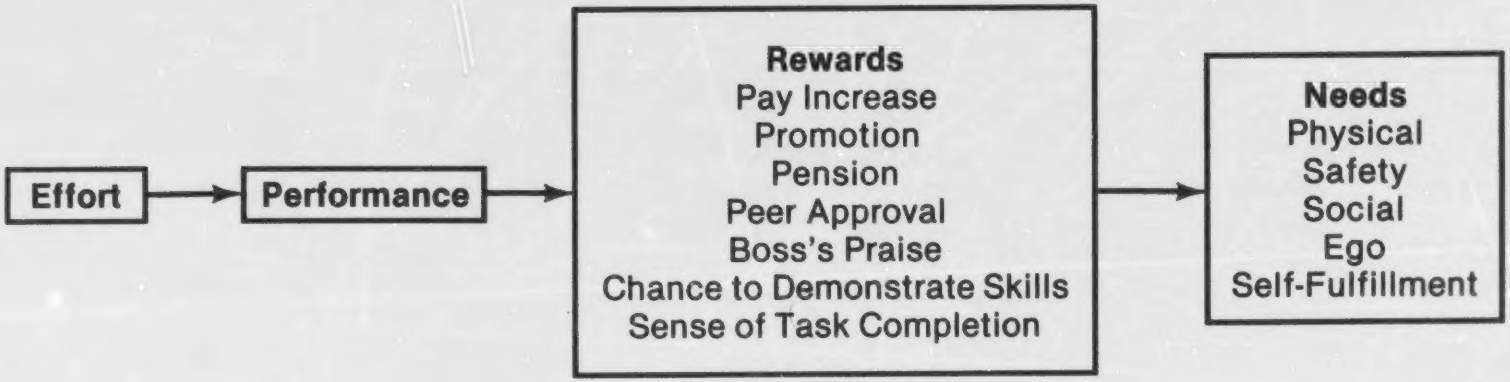
Ego, Self-Esteem

Social Acceptance and Belonging

Safety and Security

Physiological
Air, Water, Food, Shelter, Sleep, Sex
Survival

People Expect Work to Satisfy Needs



Effort

Performance

Rewards
Pay Increase
Promotion
Pension
Peer Approval
Boss's Praise
Chance to Demonstrate Skills
Sense of Task Completion

Needs
Physical
Safety
Social
Ego
Self-Fulfillment

TM #2

FSS - 17-E

HUMAN RELATIONS SKILLS
UNIT I

CLASS ASSIGNMENT SHEET #1 — RANK EMPLOYEES' NEEDS AND DESIRES

NAME ____ SCORE ________________

All too often supervisors think that they know what the employees want, but the employees claim otherwise. To illustrate this point, the following survey was conducted. The supervisors were asked to rank ten job factors in the order they thought their employees would rank them. Independently, the workers were asked to rank the same factors in order of importance.

Rank the ten factors as you believe your employees would rank them. Write a "1" before the factor you believe the employees will rank as their first concern, a "2" before the second most important factor, and so on through number 10. Then compare your results with those of the original survey.

Job Factors

_____Work that keeps you interested

_____Good wages

_____Job security

_____Good working conditions

_____Personal loyalty of management to workers

_____Promotion and growth in company

_____Feeling "in" on things

_____Full appreciation of work done

_____Sympathetic help on personal problems

_____Tactful disciplining

HUMAN RELATIONS SKILLS
UNIT I

CLASS ASSIGNMENT SHEET #2 — DISCUSS HUMAN RELATIONS CASE STUDY

NAME ______________________________ SCORE ______________

Good human relations between a food service supervisor and an employee require exceptional understanding and caring.

Read the following case study, and discuss as a class. Questions that you may want to include in the discussion are listed below.

Case Study

Kathy has worked as a cook in a small hospital for five years. She has been a conscientious worker and takes a great deal of pride in her work. She is willing to help the other cooks, and too frequently they take advantage of her good nature. Kathy feels that she is overworked, but she has never said so. Because she has never received a promotion and feels overworked, she has decided to accept employment elsewhere. When she gave her two weeks' notice, the food service supervisor said, "Kathy, you can't quit; we need you." She was persuaded to think it over for a few days. At home that night, she told her husband that this was the only complimentary remark that the supervisor had ever made to her.

A. What does Kathy want most from her job?

B. How does this need compare with those of most people?

C. What must the food service supervisor do to avoid such situations in the future?

D. What are several areas of good human relations that have been neglected in this department?

E. Share a similar example of poor human relations that has happened in your health care facility.

Comments: ____

____

____

____

____

____

____

HUMAN RELATIONS SKILLS
UNIT I

CLASS ASSIGNMENT SHEET #3 — ANALYZE PERSONAL JOB ATTITUDES

NAME ______________________________ SCORE ______________

A positive attitude holds a six-to-one advantage over intelligence alone. There is no place where the *power of positive thinking* is more important than on the job.

PART I

Analyze your attitude toward yourself by completing the following chart. Rate yourself on each statement. Choose only one answer per question.

	Always 10 pt.	Sometimes 5 pt.	Never 3 pt.
Do you like yourself?			
Do you like your appearance?			
When you speak of others, is it always necessary, kind, and truthful?			
Do you display your strongest traits?			
Do you recognize your weakest traits and try to improve them?			
Do you find the good in others?			
Do you make your own decision regardless of whether others think it is right or wrong?			
Are you happy?			

Total points__________

Scoring:

70-80 — You have a good attitude toward yourself.

60-70 — Check attitudes; check your self-confidence.

CLASS ASSIGNMENT SHEET #3

PART II

The basis of good human relations is learning to control attitudes and displaying a positive attitude on the job. You control your own attitudes. No one can make you irritable; you make yourself irritable in response to another's behavior.

One of Shakespeare's greatest lines is, "To be, or not to be." Analyze your attitude at work by completing the following checklist. (Complete the checklist periodically to see if you are improving.) Place a check before each attitude you exhibited on the job this past week.

To Be . . .	**Not To Be . . .**
☐ Cheerful	☐ Irritable
☐ Neat and clean	☐ Physically untidy
☐ Optimistic	☐ Pessimistic
☐ Self-controlled	☐ Unsociable
☐ Not critical	☐ Gossipy
☐ Reliable	☐ Selfish
☐ Tactful	☐ Jealous
☐ Self-reliant	☐ Revengeful
☐ Enthusiastic	☐ Suspicious
☐ Friendly	☐ Bossy
☐ Interested in others	☐ Conceited
☐ Cooperative	☐ Lazy
☐ Articulate	☐ Paranoid
☐ Courteous	☐ Unhappy
☐ Willing to accept responsibility	☐ Not dependable
☐ Likeable	☐ Not likeable
☐ Capable	☐ Not capable
☐ Self-confident	☐ Not self-confident
☐ Satisfied	☐ Frustrated
☐ Useful	☐ Useless

HUMAN RELATIONS SKILLS
UNIT I

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

(NOTE: These are the results of one study, but factors will vary from facility to facility.)

HOW SUPERVISORS AND EMPLOYEES RATED TEN JOB FACTORS

Job Factors	Employee Rating	Supervisor Rating
Full appreciation of work done	1	8
Feeling "in" on things	2	10
Sympathetic help on personal problems	3	9
Job security	4	2
Good wages	5	1
Work that keeps you interested	6	5
Promotion and growth in company	7	3
Personal loyalty of management to workers	8	6
Good working conditions	9	4
Tactful disciplining	10	7

(NOTE: By comparison you can see that the supervisors' perceptions of what was important to their employees was somewhat out of step with what the employees really thought.)

Class Assignment Sheet #2 — Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #3 — Evaluated to the satisfaction of the class instructor

HUMAN RELATIONS SKILLS
UNIT I

CLINICAL ASSIGNMENT SHEET #1 — CONDUCT IN-SERVICE CLASS ON DEVELOPING A POSITIVE SELF-CONCEPT

NAME ______________________________ SCORE ______________

A positive self-concept is necessary for good human relations. It is difficult to list only positive characteristics about yourself. We can easily list negative characteristics because we have heard them all our lives: "You are lazy," "You're too fat," "You need to improve your work." It is a very rewarding experience to have your co-workers list positive things about you. This assignment will help develop a more positive self-concept.

PART I

Conduct an in-service class on positive self-concept. Have a 3-by-5-inch card for each person there. Instruct each person to place his or her name at the top of the card and pass it to the right. The person who receives the card is to look at the name on the top, write one positive thing about this person, and then pass the card on to the right. When the cards have completed their trip around the room, each person will have the one with his or her name on it. The card will be filled with positive statements from their fellow workers.

PART II

Have each employee fill out the chart on personal job attitudes in Class Assignment Sheet #3 and answer the questions below. Discuss as a class.

A. What recent incident at work made you feel good about yourself? ______________

____

____

B. What recent incident at work made you feel bad about yourself? ______________

____

____

Comments: ____

____

____

____

HUMAN RELATIONS SKILLS
UNIT I

CLINICAL ASSIGNMENT SHEET #2 — OBSERVE NEEDS AND ATTITUDES OF AN ELDERLY PATIENT

NAME ______________________ SCORE ____________

Good human relations between an elderly patient and a food service supervisor require exceptional understanding and caring. Read the "Beatitudes for Friends of the Aged," and then record some of the needs and attitudes you observe while dealing with an elderly patient. Write your observations in the spaces provided.

Beatitudes for Friends of the Aged

Blessed are they who understand
My faltering step and palsied hand.

Blessed are they who know that my ears today
Must strain to catch the things they say.

Blessed are they who seem to know
That my eyes are dim and my wits are slow.

Blessed are they who looked away
When coffee spilled at the table today.

Blessed are they with a cheery smile
Who stop to chat for a little while.

Blessed are they who never say,
"You've told that story twice today."

Blessed are they who know the ways
To bring back memories of yesterdays.

Blessed are they who make it known
That I'm loved, respected, and not alone.

Blessed are they who know I'm at a loss
To find the strength to carry this Cross.

Blessed are they who ease the days
On my journey Home in loving ways.

Used with permission of the *Oklahoma Observer.*

CLINICAL ASSIGNMENT SHEET #2

A. Record an incident involving a specific patient who required your greatest skill in human relations.

____

____

____

____

____

____

____

____

____

____

B. What basic human need was the patient exhibiting? ____________

C. Was your attitude positive or defensive? ____________

D. Was the patient's attitude positive? ____________

E. Were you happy with the handling of the incident? ____________

F. How could your handling of the incident have been improved? ____________

____

____

G. What will you do differently the next time the situation arises? ____________

____

____

H. Has this unit on human relations helped you become more aware of other people and their needs? ____________

Comments: ____________________________________

____

____

HUMAN RELATIONS SKILLS
UNIT I

CLINICAL ASSIGNMENT SHEET #3 — EVALUATE PERSONAL ABILITY TO USE HUMAN RELATIONS SKILLS

NAME ______________________ SCORE ____________

To improve human relations in your department, you must know a great many things about each employee. Study each person carefully. How much do you know about the people who work with you? Are they happy? Are they free from job tension? Do they like their jobs? Do they like the health care facility?

Evaluate yourself in dealing with the people in your department by completing the following chart. Write a check in the appropriate column.

HUMAN RELATIONS	**Yes**	**Sometimes**	**No**
I know each person by name and call each one by name on the job			
I know a great many things about each employee that are important to them as individuals			
I take an interest in each person's problems as though they were my own			
I help each employee see how his or her work contributes to achieving the major goals of the department			
I recognize individual differences in employees by studying each employee carefully			
When I give instructions, I do it positively by showing confidence in the employee(s) concerned			
I praise the employees in public, and when reprimanding is necessary, I do this in private			
Because of the work climate I help provide, the employees have a low anxiety level on the job			

Prepared by Dr. Berlie J. Fallon, Chairman, Department of Education, Texas Tech University, Lubbock, Texas.

HUMAN RELATIONS SKILLS
UNIT I

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

HUMAN RELATIONS SKILLS
UNIT I

TEST

NAME ______________________________ SCORE ______________

1. Match terms associated with basic human relations skills to their correct definitions. Write the correct numbers in the blanks.

_____a. To stimulate an active interest in work through meeting needs and appealing to employees' interests

_____b. Act of helping or benefiting another by giving of oneself

_____c. Feeling or mood that indicates readiness for activity

_____d. To show consideration and concern for others

_____e. Process of getting along with others and learning to accept them as they are

_____f. Relationship between people characterized by harmony, closeness, and understanding

_____g. Atmosphere or feeling prevailing in a department or facility

1. Human relations
2. Attitude
3. Rapport
4. Motivate
5. Morale
6. Respect
7. Service

2. State three reasons why good human relations are important

a. ______________________________

b. ______________________________

c. ______________________________

3. Select from the following list keys to dealing with people. Write an "X" in the blank before each correct answer.

_____a. Be insensitive to each individual's feelings

_____b. Match each employee's needs to the job

_____c. Keep employees guessing about new procedures

TEST

______d. Utilize every opportunity to show employees what they are doing wrong

______e. Show interest in employees' opinions and/or criticisms

______f. Give each worker a bonus

______g. Ignore employee's point of view; after all, you are the boss

______h. Treat employees fairly and impartially

4. Arrange in order of importance the categories of basic human needs. Write a "1" before the most basic human need, a "2" before the next most basic human need, and so on.

______a. Ego or esteem needs

______b. Social or belonging needs

______c. Self-fulfillment needs

______d. Basic physical needs

______e. Safety or security needs

5. List personal differences that influence human relations.

a. ______________________________

b. ______________________________

c. ______________________________

6. List three areas in which good health care facility relationships are important.

a. ______________________________

b. ______________________________

c. ______________________________

7. Discuss three methods of developing good relations with other departments.

a. ______________________________

b. ______________________________

c. ______________________________

TEST

8. Select from the following list techniques for promoting rapport between patient and employee. Write an "X" in the blank before each correct answer.

_____a. Speak to patient and family in medical jargon

_____b. Treat the patient as you would any sick child

_____c. Show empathy for patient and family

_____d. Defend your department when the patient complains about the food

_____e. Use verbal and nonverbal personal contact

9. List five techniques for motivating employees and promoting cooperation and teamwork.

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

e. ______________________________

10. List five factors that contribute to high morale.

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

e. ______________________________

11. State four guidelines for a positive attitude toward oneself.

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

TEST

(NOTE: Test questions 12-17 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

12. Rank employees' needs and desires.

13. Discuss human relations case study.

14. Analyze personal job attitudes.

15. Conduct in-service class on developing a positive self-concept.

16. Observe needs and attitudes of an elderly patient.

17. Evaluate personal ability to use human relations skills.

HUMAN RELATIONS SKILLS
UNIT I

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 331. The point total for questions 1-11 is 156; the point total for questions 12-17 is 175.)

1. (21 points)

   a. 4
   b. 7
   c. 2
   d. 6
   e. 1
   f. 3
   g. 5

2. (15 points)

   Answer should include any three of the following

   a. Result in higher productivity
   b. Produce more interest in work
   c. Achieve better efficiency
   d. Produce low employee turnover
   e. Result in less absenteeism

3. (15 points)

   b, e, h

4. (25 points)

   a. 4
   b. 3
   c. 5
   d. 1
   e. 2

ANSWERS TO TEST

5. (15 points)

   a. Intelligence

   b. Emotional responses

   c. Physical responses

6. (9 points)

   Answer should include any three of the following

   a. In dealing with the public

   b. Within the dietary department

   c. Among other departments

   d. With administration or management

   e. In dealing with unions

7. (9 points)

   Answer should include any three of the following

   a. Respect other departments and the individuals in them

   b. Practice good manners

   c. Provide willing cooperation

   d. Use good communication skills

   e. Use proper chain of communication when dealing with problems

8. (10 points)

   c, e

9. (20 points)

   Answer should include any five of the following

   a. Give liberal praise

   b. Practice active listening

ANSWERS TO TEST

c. Encourage employees to exchange ideas and to work together

d. Avoid arguments

e. Clear misunderstandings immediately

f. Set fair challenges

g. Encourage each employee to offer opinions and suggestions for improving job and/or department

h. Avoid "cover-up"

10. (5 points)

Answer should include any five of the following

a. Pride in work

b. Job satisfaction

c. Adequate salary

d. Good working conditions

e. Fringe benefits

f. Awareness of job responsibilities

g. Advance notice of change

h. Fair treatment

i. Fair evaluation of job performance

j. Appreciation for work done

k. Participation in decision making

11. (12 points)

Answer should include any four of the following

a. Set personal goals

b. Demand obligations from self

ANSWERS TO TEST

- c. Seek self-improvement
- d. Develop self-confidence
- e. Evaluate yourself periodically
- f. Give more than is expected
- g. Learn to know yourself
- h. Be proud of the person you are

12. Evaluated to the satisfaction of the class instructor (20 points)

13. Evaluated to the satisfaction of the class instructor (20 points)

14. Evaluated to the satisfaction of the class instructor (20 points)

15. Evaluated to the satisfaction of the clinical instructor (50 points)

16. Evaluated to the satisfaction of the clinical instructor (25 points)

17. Evaluated to the satisfaction of the clinical instructor (40 points)

LEADERSHIP
UNIT II

UNIT OBJECTIVE

After completing this unit, the student should be able to use leadership skills in job-related and management situations. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Match terms associated with leadership to their correct definitions.
2. State the results of good leadership.
3. Select from a list personal traits of a leader.
4. Select from a list effective leadership skills.
5. Match leadership styles to their correct definitions.
6. State reasons for developing a team management concept.
7. Select from a list good motivational techniques.
8. State ways to improve morale.
9. Describe motivation through good oral communication.
10. Describe motivation through good written communication.
11. Solve case studies using team management concepts.
12. Use written communication as a motivational tool.
13. Make recommendations to improve oral communication.
14. Make recommendations to improve written communications.
15. Evaluate personal leadership traits.
16. Make recommendations to improve leadership skills.

LEADERSHIP
UNIT II

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Provide students with objective sheet.

   B. Discuss unit and specific objectives.

   C. Provide students with information and assignment sheets.

   D. Discuss information and assignment sheets.

   E. Develop appropriate learning activities for special needs students.

   F. Review *Food Service Worker*, Section E, Unit II, "Basic Communication Skills."

   G. Review *Food Service Supervisor*, Section B, Unit X, "Communication Skills."

   H. Ask students to discuss an example of good leadership in the facility in which they are employed.

   I. Ask students to discuss an example of poor communication and the results of the example chosen.

   J. Give test.

   K. Reteach if necessary.

II. Instructional materials

   A. Objective sheet

   B. Suggested activities

   C. Information sheet

   D. Class assignment sheets

      1. Class Assignment Sheet #1 — Solve Case Studies Using Team Management Concepts

      2. Class Assignment Sheet #2 — Use Written Communication as a Motivational Tool

   E. Answers to class assignment sheets

SUGGESTED ACTIVITIES

F. Clinical assignment sheets

1. Clinical Assignment Sheet #1 — Make Recommendations to Improve Oral Communication
2. Clinical Assignment Sheet #2 — Make Recommendations to Improve Written Communications
3. Clinical Assignment Sheet #3 — Evaluate Personal Leadership Traits
4. Clinical Assignment Sheet #4 — Make Recommendations to Improve Leadership Skills

G. Answers to clinical assignment sheets

H. Test

I. Answers to test

III. Unit references

A. Lateiner, Alfred. *Modern Techniques of Supervision*. Stamford, Connecticut: Lateiner Publishing Company, 1968.

B. Parker, B.V. *The Dynamics of Supervision*, McGraw-Hill Management Series in Marketing. New York: McGraw-Hill Book Company, 1970.

C. Scannell, E.E. *Communications for Leadership*, McGraw-Hill Gregg Management Series in Marketing. New York: McGraw-Hill Book Company, 1970.

D. Strauss, G., and L.R. Sayles. *The Human Problems of Management*, 4th ed. Englewood Cliffs, New Jersey: Prentice-Hall, 1980.

E. West, B.B., et al. *Food Service in Institutions*, 5th ed. New York: John Wiley and Sons, 1977.

LEADERSHIP
UNIT II

INFORMATION SHEET

I. Terms and definitions

  A. Leadership — Ability to influence others

  B. Morale — Atmosphere or feeling prevailing in a department or facility

  C. Cooperation — Working together toward a common goal

  D. Communication — Process of giving and receiving information

  E. Quality circle — Group of workers doing the same or similar work in the same department or work area who regularly and voluntarily meet to discuss problems associated with their jobs

  (NOTE: This concept is designed to give the worker a real voice in deciding how the work will be done. Workers suggest changes in materials and procedures. Once management agrees the suggested changes would be beneficial, executing the changes falls to the employees themselves. The concept provides workers with an incentive to improve productivity and quality of work.)

II. Results of good leadership

(NOTE: Quality of leadership affects employee morale.)

  A. Energetic, cooperative workers

  (NOTE: Good leadership causes people to cooperate in achieving management goals because they see an emotional and rational reason to do so.)

  B. Average people achieving ABOVE-average results

III. Personal traits of a leader (Clinical Assignment Sheet #3)

  A. Competence

  B. Emotional stability

  C. Impartiality

  D. Firmness

  E. Integrity

  F. Self-discipline

INFORMATION SHEET

G. Enthusiasm

H. Willingness to study and keep current

IV. Effective leadership skills (Clinical Assignment Sheet #4)

A. Inspiring people

B. Teaching people

C. Dealing with people fairly and diplomatically

D. Obtaining and holding confidence and respect of others

E. Achieving cooperation and teamwork

F. Making decisions properly

G. Admitting errors

H. Analyzing and planning

I. Developing self-confidence in others

J. Developing employee initiative

K. Obtaining and using suggestions from employees

L. Giving support to workers

V. Leadership styles

A. Autocratic — Leader knows what needs to be done and how, tells workers what their assignments are, and demands obedience

B. Bureaucratic — Leader administers "by the book" and follows policies and procedures to the letter, allowing workers little or no freedom

C. Diplomatic — Leader is persuasive and "sells" ideas, motivating workers to achieve desired results

D. Participative — Leader encourages workers to participate or share to some degree in decisions and allows people a high degree of freedom

EXAMPLES: Team management techniques, quality circles

E. Free rein — Leader sets policies and allows subordinates to operate with a minimum of direction or control

INFORMATION SHEET

VI. Reasons for developing a team management concept (Class Assignment Sheet #1)

A. Developing teamwork within dietary department

B. Developing teamwork between two or more teams

EXAMPLE: Dietary and nursing personnel work together as a team to see that good, hot, attractive food is distributed properly.

C. Developing support and cooperation among members of management team

EXAMPLE: Food service supervisor, director of nurses, housekeeping supervisor, maintenance supervisor, professional staff

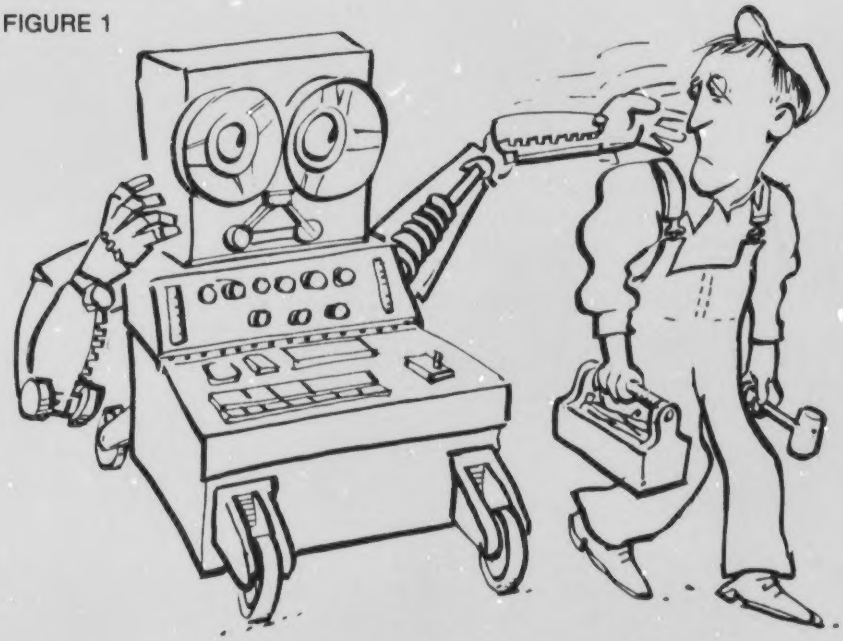
VII. Good motivational techniques

A. Praising in advance (Figure 1)

(NOTE: People need appreciation. They feel a deep hunger for praise. Praise must be sincere.)

EXAMPLE:

FIGURE 1



It's human to want a pat on the back, but nobody wants a mechanical gesture.

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INFORMATION SHEET

B. Giving cooperation before expecting to receive it

(NOTE: If you are not getting cooperation, examine yourself. You must continue giving without expecting immediate return on your investment.)

C. Admitting your errors

(NOTE: Covering up mistakes causes resentment and gossip.)

D. Setting a fair challenge

(NOTE: People like to rise to a challenge. The challenge must be attainable. The best challenges are short-range ones.)

E. Involving workers in solving problems

EXAMPLE: Use quality circles.

VIII. Ways to improve morale

A. Keep workers informed about how they are getting along

B. Keep workers current about changes that will affect them and/or their work

C. Assign tasks to maximize employees' strengths and minimize their weaknesses

D. Be fair regarding assignments and rules

E. Do not flaunt your authority

IX. Motivation through good oral communication (Clinical Assignment Sheet #1)

A. Provide all information that employees need

B. Give information clearly and calmly

C. Be sure the employees are not performing a dozen different jobs while you are giving them information

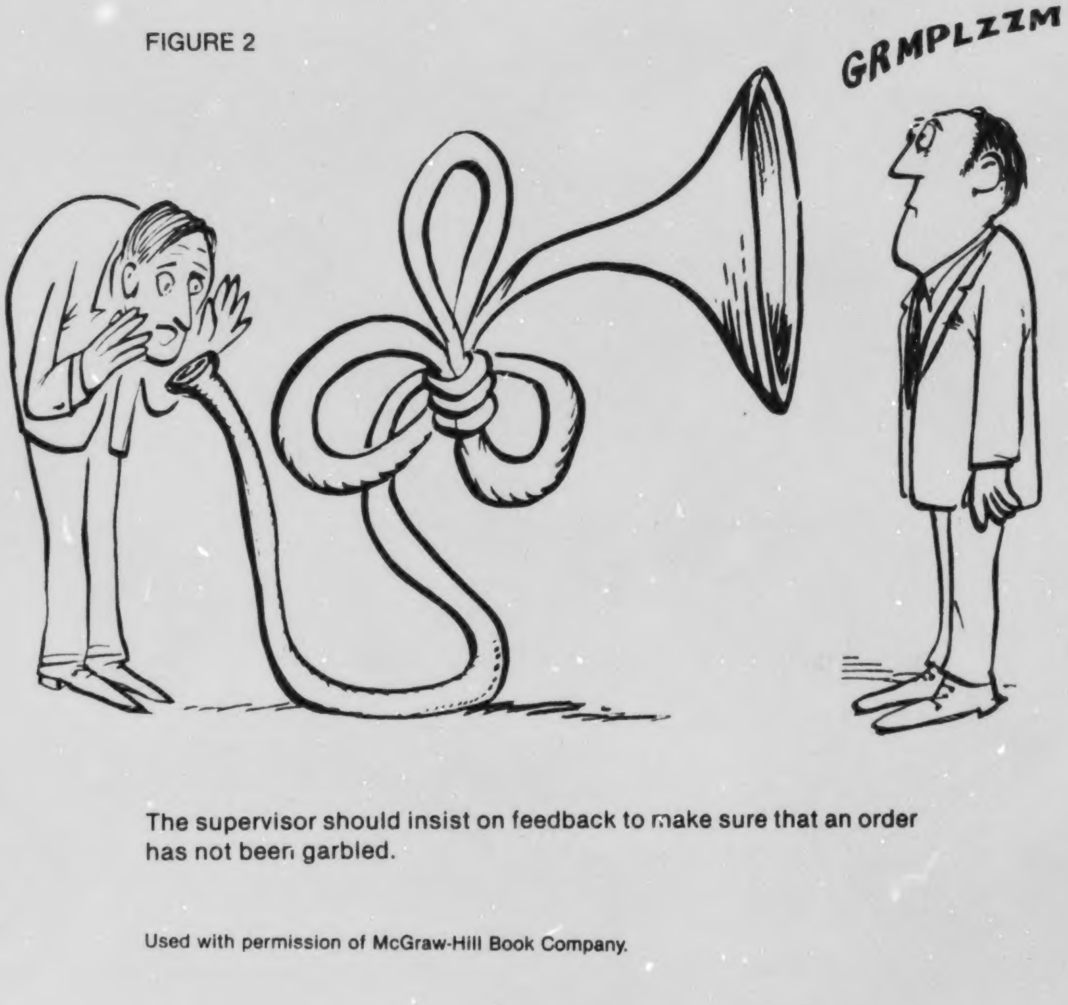
INFORMATION SHEET

D. Check on employee's understanding of the information (Figure 2)

(NOTE: Insist on feedback.)

EXAMPLE:

FIGURE 2



The supervisor should insist on feedback to make sure that an order has not been garbled.

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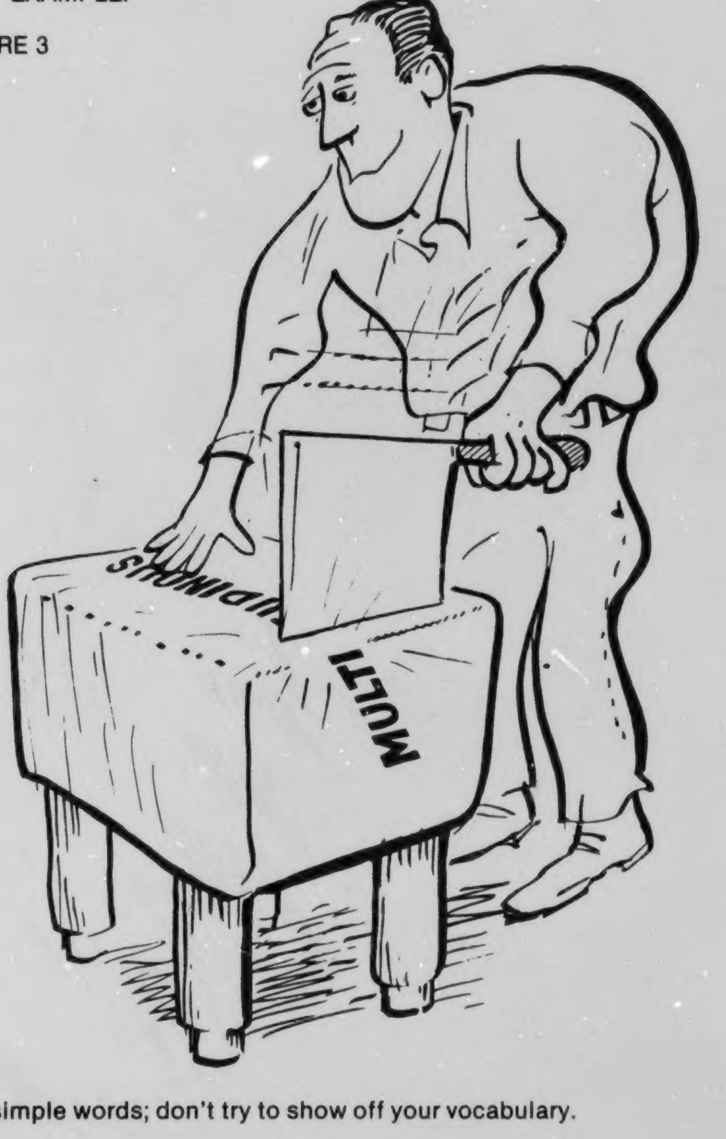
INFORMATION SHEET

X. Motivation through good written communication (Class Assignment Sheet #2; Clinical Assignment Sheet #2)

A. Use simple words (Figure 3; Clinical Assignment Sheet #4)

EXAMPLE:

FIGURE 3



Use simple words; don't try to show off your vocabulary.

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INFORMATION SHEET

B. Be specific

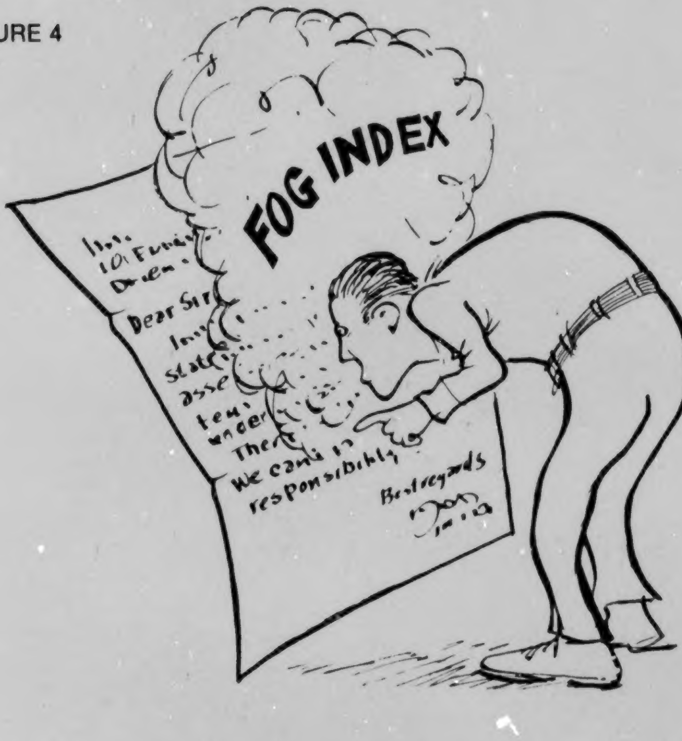
(NOTE: Establish what you are writing about and why you are writing.)

C. Be brief (Figure 4)

(NOTE: Adding unnecessary details only confuses and frustrates the reader.)

EXAMPLE:

FIGURE 4



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D. Include all important facts

EXAMPLES: Include who, what, when, where, why, how.

E. Be pleasant and courteous

EXAMPLES: Use "please," "thank you," "we appreciate . . ."

F. Watch correct spelling, proper writing or typing style

(NOTE: Avoid giving an impression of sloppiness.)

LEADERSHIP
UNIT II

CLASS ASSIGNMENT SHEET #1 — SOLVE CASE STUDIES USING TEAM MANAGEMENT CONCEPTS

NAME ______________________ SCORE __________

Team management concepts promote teamwork within departments, between teams, and among management team members.

Use team management concepts in solving the following case studies. Answer the following questions.

Case Study #1

Patient trays for the dining room patients are prepared by dietary personnel and loaded on tray carts. The tray carts are pushed into the dining room, where nurses aides pass the trays to the patients. The dietary supervisor observes a nurses aide pass the wrong tray to a patient.

A. How can the food service supervisor reinforce the team management concept in this situation?

Case Study #2

In a long-term health care facility, patient care plans are completed in a weekly meeting of the nursing supervisor, the dietary supervisor, and the social services director. Each week a group of ten patients is discussed. The supervisors write out pertinent information concerning their particular services to the patient before coming to the meeting.

A. Is this an example of a team management concept? __________

B. What are the good or bad points in this case study?

LEADERSHIP
UNIT II

CLASS ASSIGNMENT SHEET #2 — USE WRITTEN COMMUNICATION AS A MOTIVATIONAL TOOL

NAME ______________________________ SCORE ______________

Written communication can be an effective motivator. Read the following example, and write a special letter of recognition to Mary for her performance on the job.

EXAMPLE: You have been employed as a food service supervisor in your facility for three years. One of the cooks, Mary, was already working in the facility when you were hired. Mary has not missed one day of work while she has been your employee. She has also had a good record of coming to work on time. She has performed her duties conscientiously. You notice that today is the date she began working in the facility four years ago.

Write a special letter of recognition to Mary.

LEADERSHIP
UNIT II

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1

Case Study #1

A. The food service supervisor should discuss the problem with the director of nursing since the nurses aides are in that department. Perhaps, together, the food service supervisor and director of nursing can discuss ways to improve the situation. Perhaps training of the nurses aides can be done jointly by both the food service supervisor and the director of nursing or by an appointed charge nurse.

Case Study #2

A. Yes

B. The good point of this case study is that all members of the team are discussing their particular services to the patient, whether it is diet, nursing care, or social needs. The team concept aims at total patient care, not just at meeting patient needs in one area.

Class Assignment Sheet #2 — Evaluated to the satisfaction of the class instructor

Letter of Recognition

EXAMPLE: It gives me great pleasure to present you with a special letter of recognition on the anniversary date of your employment.

During the three years I have been employed as the food service supervisor, your attendance and work record have been outstanding. It is a real asset to have an employee who always comes to work on time and does not miss work. Your cheerful, willing, and conscientious attitude on the job are invaluable to me and to the other employees in the department.

LEADERSHIP
UNIT II

CLINICAL ASSIGNMENT SHEET #1 — MAKE RECOMMENDATIONS TO IMPROVE ORAL COMMUNICATION

NAME ______________________________ SCORE ______________

Your ability to express yourself through oral communication is important in developing your leadership abilities. Give a verbal message to a fellow employee. Then quiz that employee on the spot to determine his or her real understanding of the message. Answer the following questions.

A. Did the employee actually perceive the message correctly? ______________

B. If the employee did not perceive the message correctly, why not?

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C. Was it the fault of the sender or the receiver? Explain.

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D. How could you have improved your use of communication skills in this instance?

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LEADERSHIP
UNIT II

CLINICAL ASSIGNMENT SHEET #2 — MAKE RECOMMENDATIONS TO IMPROVE WRITTEN COMMUNICATIONS

NAME ______________________________ SCORE ______________

Analyze three recent memos that were either sent or received by the dietary department. Answer the following questions.

A. What was the real purpose of each memo?

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B. Did each memo achieve its purpose? Why or why not?

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C. How could each memo be improved?

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LEADERSHIP
UNIT II

CLINICAL ASSIGNMENT SHEET #3 — EVALUATE PERSONAL LEADERSHIP TRAITS

NAME ______________________________ SCORE ______________

The quality of leadership in a work unit has a direct effect on employee morale as indicated by such factors as the turnover rate and incidence of lateness and absenteeism. Therefore, the supervisor should be constantly trying to improve personal leadership traits. The following self-evaluation can help to identify strengths and weaknesses in this area and serve as a guide for improving leadership abilities. Complete the evaluation below using the following scale.

4 — Always
3 — Usually
2 — Occasionally
1 — Almost never

PART I

Write an "X" in the column under the number you feel best indicates how often you practice each leadership trait.

PERSONAL LEADERSHIP TRAITS	RATING			
	4	3	2	1
Competence				
Gives specific instruction or directions				
Answers questions effectively				
Assigns work efficiently				
Meets standards of quantity and quality control				
Makes decisions efficiently				
Emotional Stability				
Keeps calm in a crisis				
Avoids taking frustration out on employees				
Maintains even disposition				

CLINICAL ASSIGNMENT SHEET #3

PERSONAL LEADERSHIP TRAITS	RATING			
	4	3	2	1
Emotional Stability (continued)				
Controls anger				
Impartiality				
Assigns work without showing favoritism				
Gives praise when praise is due				
Enforces rules equally				
Listens to every employee's point of view				
Firmness				
Denies requests when appropriate				
Expects high standards to be met				
Knows and enforces departmental and facility policies				
Integrity				
Avoids using position for financial or personal gain EXAMPLE: Does not accept kickbacks from vendors				
Maintains a reputation as a truthful person				
Shows respect for subordinates				
Admits errors				
Gives employees credit for ideas and suggestions				
Self-Discipline				
Meets deadlines for completing work				
Puts facility or departmental goals ahead of personal goals				
Avoids becoming discouraged when things go wrong				

CLINICAL ASSIGNMENT SHEET #3

PERSONAL LEADERSHIP TRAITS	RATING			
	4	3	2	1
Enthusiasm				
Maintains an optimistic outlook				
Shows eagerness to do a good job				
Accepts new challenges readily				
Willingness to Study and Keep Current				
Participates in in-service training				
Attends workshops and seminars				
Reads trade journals and books				

PART II

In the space below, add your total points, and then divide the sum by 30 to get your average score.

(NOTE: If your score is less than 3, your personal leadership traits will probably interfere with your effectiveness as a supervisor.)

PART III

Discuss this self-evaluation with your clinical instructor. List below two personal leadership traits you need to develop in order to improve your effectiveness as a supervisor.

A. ______________________________

B. ______________________________

LEADERSHIP
UNIT II

CLINICAL ASSIGNMENT SHEET #4 — MAKE RECOMMENDATIONS TO IMPROVE LEADERSHIP SKILLS

NAME ____ SCORE ________________

To be an effective supervisor, you will need constantly to evaluate and improve your leadership skills. This assignment is designed to make you more aware of the leadership skills you use with ease and the skills you should plan to develop and improve.

PART I

Work in a supervisory position for a period of time as assigned by your clinical instructor. Write a description of your assignment in the space below.

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PART II

Write an "X" in the blank before each leadership skill you used in performing the supervisory duties assigned.

______Inspiring people

______Teaching people

______Dealing with people fairly and diplomatically

______Obtaining and holding confidence and respect of others

______Achieving cooperation and teamwork

______Making decisions properly

______Admitting errors

______Analyzing and planning

______Developing self-confidence in others

______Developing employee initiative

______Obtaining and using suggestions from employees

______Giving support to workers

CLINICAL ASSIGNMENT SHEET #4

PART III

Of the leadership skills you checked in Part II, list the two that you felt you used most effectively; explain why or how they were used.

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PART IV

Of the leadership skills you checked in Part II, list the two that you felt you could have improved. Explain how you could improve your use of these two leadership skills.

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LEADERSHIP
UNIT II

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 -- Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #4 — Evaluated to the satisfaction of the clinical instructor

LEADERSHIP
UNIT II

TEST

NAME ______________________________ SCORE ______________

1. Match terms associated with leadership to their correct definitions. Write the correct numbers in the blanks.

______a. Process of giving and receiving information

______b. Working together toward a common goal

______c. Ability to influence others

______d. Atmosphere or feeling prevailing in a department or facility

______e. Group of workers doing the same or similar work in the same department or work area who regularly and voluntarily meet to discuss problems associated with their jobs

1. Communication
2. Quality circle
3. Cooperation
4. Morale
5. Leadership

2. State the results of good leadership.

a. ____

b. ____

3. Select from the following list personal traits of a leader. Write an "X" in the blank before each correct answer.

______a. Firmness

______b. Incompetence

______c. Emotional stability

______d. Partiality to special employees

______e. Integrity

______f. Self-discipline

______g. Dishonesty

______h. Enthusiasm

______i. Willingness to study and keep current

TEST

4. Select from the following list effective leadership skills. Write an "X" in the blank before each correct answer.

______a. Giving support to workers

______b. Never using suggestions from employees

______c. Developing employee initiative

______d. Never admitting an error

______e. Making decisions properly

______f. Inspiring people

______g. Dealing with people fairly and diplomatically

______h. Making decisions in a hurry

______i. Developing self-confidence in others

______j. Achieving cooperation and teamwork

______k. Teaching people

______l. Obtaining and holding confidence and respect of others

______m. Analyzing and planning

______n. Not encouraging cooperation and teamwork

5. Match leadership styles to their correct definitions. Write the correct numbers in the blanks.

______a. Leader administers "by the book" and follows policies and procedures to the letter, allowing workers little or no freedom

______b. Leader encourages workers to participate or share to some degree in decisions and allows people a high degree of freedom

______c. Leader is persuasive and "sells" ideas, motivating workers to achieve desired results

______d. Leader knows what needs to be done and how, tells workers what their assignments are, and demands obedience

______e. Leader sets policies and allows subordinates to operate with a minimum of direction or control

1. Diplomatic
2. Free rein
3. Autocratic
4. Participative
5. Bureaucratic

TEST

6. State reasons for developing a team management concept.

a. ____________________

b. ____________________

c. ____________________

____

7. Select from the following list good motivational techniques. Write an "X" in the blank before each correct answer.

_____a. Never admitting your errors

_____b. Setting a fair challenge

_____c. Giving cooperation before expecting to receive it

_____d. Involving workers in solving problems

_____e. Never praising employees; praise might make them unmanageable

_____f. Praising in advance

8. State ways to improve morale.

a. ____________________

b. ____________________

c. ____________________

d. ____________________

e. ____________________

9. Describe motivation through good oral communication.

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TEST

10. Describe motivation through good written communication.

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(NOTE: Test questions 11-16 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

11. Solve case studies using team management concepts.

12. Use written communication as a motivational tool.

13. Make recommendations to improve oral communication.

14. Make recommendations to improve written communications.

15. Evaluate personal leadership traits.

16. Make recommendations to improve leadership skills.

LEADERSHIP
UNIT II

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 483. The point total for questions 1-10 is 158; the point total for questions 11-16 is 325.)

1. (10 points)

    a. 1

    b. 3

    c. 5

    d. 4

    e. 2

2. (6 points)

    a. Energetic, cooperative workers

    b. Average people achieving ABOVE-average results

3. (28 points)

    a, c, e, f, h, i

4. (18 points)

    a, c, e, f, g, i, j, k, l, m

5. (10 points)

    a. 5

    b. 4

    c. 1

    d. 3

    e. 2

ANSWERS TO TEST

6. (9 points)

   a. Developing teamwork within dietary department

   b. Developing teamwork between two or more teams

   c. Developing support and cooperation among members of management team

7. (12 points)

   b, c, d, f

8. (15 points)

   a. Keep workers informed about how they are getting along

   b. Keep workers current about changes that will affect them and/or their work

   c. Assign tasks to maximize employees' strengths and minimize their weaknesses

   d. Be fair regarding assignments and rules

   e. Do not flaunt your authority

9. (20 points)

   Description should include the following

   a. Provide all information that employees need

   b. Give information clearly and calmly

   c. Be sure the employees are not performing a dozen different jobs while you are giving them information

   d. Check on employee's understanding of the information

10. (30 points)

    Description should include the following

    a. Use simple words

    b. Be specific

    c. Be brief

    d. Include all important facts

    e. Be pleasant and courteous

    f. Watch correct spelling, proper writing or typing style

ANSWERS TO TEST

11. Evaluated to the satisfaction of the class instructor (20 points)

12. Evaluated to the satisfaction of the class instructor (25 points)

13. Evaluated to the satisfaction of the clinical instructor (25 points)

14. Evaluated to the satisfaction of the clinical instructor (30 points)

15. Evaluated to the satisfaction of the clinical instructor (75 points)

16. Evaluated to the satisfaction of the clinical instructor (150 points)

PERSONNEL MANAGEMENT SKILLS
UNIT III

UNIT OBJECTIVE

After completing this unit, the student should be able to use management skills in the supervision of employees. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Select from a list the tools of personnel management.
2. State the purposes of a job description.
3. Select from a list items included in a job description.
4. State the purposes of a preemployment interview.
5. Select from a list guidelines for preemployment interviews.
6. List ways to advertise job openings.
7. State steps for orientation of new employees.
8. Select from a list items to include in preparing a work schedule of assignments.
9. Arrange in order steps in a four-step training program.
10. Describe development of a training plan.
11. Select from a list goals of a performance evaluation.
12. State ways to recognize outstanding work performance.
13. State ways to correct unsatisfactory work performance.
14. Write a job description.
15. Write a work schedule.
16. Analyze a job description.
17. Evaluate a preemployment interview.
18. Complete an employee orientation form.

OBJECTIVE SHEET

19. Analyze a work schedule.

20. Train an employee, using the four-step training plan.

21. Complete an employee performance evaluation.

PERSONNEL MANAGEMENT SKILLS
UNIT III

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Provide students with objective sheet.

   B. Discuss unit and specific objectives.

   C. Provide students with information and assignment sheets.

   D. Discuss information and assignment sheets.

   E. Develop appropriate learning activities for special needs students.

   F. Have students role play conducting a preemployment interview.

   G. Ask students to bring a copy of their own job descriptions and work schedules to discuss in class.

   H. Discuss use of term *human resource management* instead of *personnel management*. Ask students which term is used in their facilities.

   I. Ask students to bring a copy of the performance rating form used in their facilities.

   J. Give test.

   K. Reteach if necessary.

II. Instructional materials

   A. Objective sheet

   B. Suggested activities

   C. Information sheet

   D. Class assignment sheets

      1. Class Assignment Sheet #1 — Write a Job Description

      2. Class Assignment Sheet #2 — Write a Work Schedule

   E. Answers to class assignment sheets

   F. Clinical assignment sheets

      1. Clinical Assignment Sheet #1 — Analyze a Job Description

      2. Clinical Assignment Sheet #2 — Evaluate a Preemployment Interview

SUGGESTED ACTIVITIES

3. Clinical Assignment Sheet #3 — Complete an Employee Orientation Form

4. Clinical Assignment Sheet #4 — Analyze a Work Schedule

5. Clinical Assignment Sheet #5 — Train an Employee, Using the Four-Step Training Plan

6. Clinical Assignment Sheet #6 — Complete an Employee Performance Evaluation

G. Answers to clinical assignment sheets

H. Test

I. Answers to test

III. Unit references

A. Knoll, A.P. *Food Service Management: A Human Relations Approach.* New York: McGraw-Hill Book Company, 1976.

B. Strauss, G., and L.R. Sayles. *Personnel, The Human Problems of Management,* 4th ed. Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1980.

C. West, B.B., et al. *Food Service in Institutions,* 5th ed. New York: John Wiley and Sons, Inc., 1977.

PERSONNEL MANAGEMENT SKILLS
UNIT III

INFORMATION SHEET

I. Tools of personnel management

   A. Job description of each position managed

   B. Preemployment interview

   C. Employee orientation plan

   D. Work schedule of assignments

   E. Training plan

   F. Performance evaluation

   G. Incident report form

   H. Counseling report form

   I. Disciplinary action form

   J. Grievance form

II. Purposes of a job description

   A. Lists duties in a specific job position

   B. Shows required skills and responsibilities

   C. Shows job relationships

   D. Aids in matching qualified applicant to job position

III. Items included in a job description (Class Assignment Sheet #1; Clinical Assignment Sheet #1)

   A. Job title

   B. Job code or number

   C. Job location

   D. Job summary

   E. Performance requirements

INFORMATION SHEET

F. Supervision

(NOTE: This should be a statement of who is supervising the employee and whom the employee will be supervising.)

G. Relation to other jobs

(NOTE: This refers to job promoted from or job promoted to.)

H. Qualifications

(NOTE: This includes experience required, minimum education or training required, or other information specific to the job.)

IV. Purposes of a preemployment interview

A. Employer can determine fitness of applicant for job opening

B. Applicant can determine interest in the position and facility by information provided

V. Guidelines for preemployment interviews (Clinical Assignment Sheet #2)

A. Provide application form to be filled out by applicant before beginning interview

B. Help applicant feel at ease

C. Be friendly

D. Provide privacy and freedom from tension

E. Observe personal characteristics and reactions

EXAMPLES: Note appearance, mental alertness, emotional stability.

F. Obtain information about previous training or work experience

G. Obtain information about why applicant left previous job

H. Use job description to provide information to applicant about position

I. Investigate references

VI. Ways to advertise job openings

A. Place newspaper ads

B. Post notices on school bulletin boards

C. Encourage word of mouth

INFORMATION SHEET

VII. Steps for orientation of new employees (Clinical Assignment Sheet #3)

   A. Tour dietary department

   B. Introduce new employee to other employees

   C. Explain organizational chart, job description, and work schedule

   D. Explain personnel policies

   E. Explain time schedule or duty schedule

   F. Allow employee to ask questions

VIII. Items to include in preparing a work schedule of assignments (Class Assignment Sheet #2; Clinical Assignment Sheet #4)

   A. Name

   B. Job title

   C. Hours

   (NOTE: Include meal break and coffee breaks.)

   D. Days off

   E. Duties and timing of duties

   F. Supervisor

IX. Steps in a four-step training program (Clinical Assignment Sheet #5)

   A. Prepare worker

   (NOTE: Put the worker at ease, and find out what the worker already knows about the job.)

   B. Present operation

   (NOTE: Tell, show, illustrate, and question carefully and patiently.)

   C. Have worker perform job under supervision

   D. Follow up worker's performance

   (NOTE: Have worker perform the job independently. Check frequently and gradually taper off coaching.)

INFORMATION SHEET

X. Development of a training plan

   A. Preplanning — Involve employees in preplanning stage

      (NOTE: Have employees offer suggestions for training needs.)

   B. Setting the stage — Conduct training in an area that is a familiar setting to employees

      (NOTE: Limit class size for maximum effectiveness.)

   C. Employee feedback — Encourage employees to talk about specific problem areas during training

   D. Employee awareness — Help employees become aware of common objectives and common problems

   E. Competition — Stimulate healthy competition and achievement

XI. Goals of a performance evaluation (Clinical Assignment Sheet #6)

   A. Identify areas where employee is doing outstanding work

   B. Identify areas where improvement is desirable

   C. Provide setting for employee to ask questions

   D. Clear up any misunderstandings about what is expected of employee

   E. Build good relationship based on mutual confidence between management and employee

XII. Ways to recognize outstanding work performance

   A. Identify a job that is completed correctly

   B. Praise employee for outstanding work

   C. Give certificates or citations for outstanding performance

   D. Give public acknowledgement of outstanding work

      EXAMPLE: Give recognition in the institution newsletter or newspaper.

INFORMATION SHEET

XIII. Ways to correct unsatisfactory work performance

A. Counsel employee concerning a job that is unsatisfactory

(NOTE: Be sure to document all counseling and disciplinary action.)

EXAMPLES:

EMPLOYEE COUNSELING REVIEW

Department ______________________ Date ______________________

Employee ______________________

This is to advise that the above-named employee has been counseled on:

Reason(s) for this procedure:

Employee comments:

EMPLOYEE SIGNATURE

PERSONNEL DIRECTOR

SUPERVISOR SIGNATURE

ADMINISTRATOR/ASSOC. ADMINISTRATOR

DEPARTMENT HEAD SIGNATURE

This is a confidential report to be placed in the employee's file in the personnel office.

INFORMATION SHEET

DISCIPLINARY ACTION FORM

Department ______________________ Date ______________________

This is to advise that disciplinary action has

been taken against ____

EMPLOYEE NAME EMPLOYEE NUMBER

Reason for action. ____

____

____

____

____

Type of action taken:

Probation *(indicate no. days)* ☐ ______ First offense ☐

Temporary suspension *(indicate no. days)* ☐ ______ Second offense ☐

Termination ☐ Third offense ☐

Employee comments: ____

____

____

Date ______________________ ______________________
EMPLOYEE SIGNATURE

____
PERSONNEL DIRECTOR

____
SUPERVISOR SIGNATURE

____
ADMINISTRATOR/ASSOC. ADMINISTRATOR

____
DEPARTMENT HEAD

This is a confidential report to be placed in the employee's file in the personnel office.

B. Emphasize the job to be corrected and not the person involved

C. Correct unsatisfactory performance as soon as possible

(NOTE: Do not let incorrect work continue until bad habits are formed.)

D. Correct a worker as many times as necessary until correct procedure becomes part of the employee's habit

(NOTE: Correcting a worker once or twice is sometimes not enough.)

PERSONNEL MANAGEMENT SKILLS
UNIT III

CLASS ASSIGNMENT SHEET #1 — WRITE A JOB DESCRIPTION

NAME ______________________________ SCORE ______________

Accurate job descriptions are a valuable resource for the food service supervisor in selecting, training, and evaluating the performance of personnel. The food service supervisor may be asked to assist in writing job descriptions for the positions in the dietary department. The following exercise is designed to provide an opportunity to develop skill in writing job descriptions.

Following the example given below, write a job description. Use the form provided on the following page.

EXAMPLE:

JOB DESCRIPTION

Job title: First cook *Date:* September 2, 19___
Job code: 2-26.32 Dept. 10 *Location:* Kitchen of university cafeteria

Job summary

Prepares meats, main dishes, soups, and gravies for noon meal.
Cleans and washes small equipment used in cooking.
Keeps own work area clean.

Performance requirements

Responsibilities: Responsible for the preparation of meat, main dishes, soups, and gravies to be served at a stated time.

Job knowledge: Plans own work schedule, knows basic principles of quantity food cookery and how to use certain equipment.

Mental application: Mentally alert.

Dexterity and accuracy: Accurate in weighing and measuring of food ingredients and portions.

Equipment used: Food chopper, mixer, ovens, ranges, steam cooker, steam-jacketed kettle, fryer, broiler, meat slicer.

Standards of production: Preparation of foods of high quality in specified quantities.

Supervision

Under general supervision of dietitian.
Gives some supervision to assistant cooks.

Relation to other jobs

Promotion from: Salad maker or vegetable preparation worker.
Promotion to: Food service supervisor (if education and ability warrant).

Qualifications

Experience: Desirable but not required.
Education and training:
Technical or vocational training not required.
Formal education: Grammar school.
Ability to read, write, speak, and understand English.

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CLASS ASSIGNMENT SHEET #1

JOB DESCRIPTION

Job title: ______________________ *Date:* ______________________

Job code: ______________________ *Location:* ______________________

Job summary ____

____

Performance requirements

Responsibilities: ____

____

Job knowledge: ____

____

Mental application: ____

____

Dexterity and accuracy: ____

____

Equipment used: ____

____

Standards of production: ____

____

Supervision ____

____

Relation to other jobs ____

____

Qualifications ____

____

PERSONNEL MANAGEMENT SKILLS
UNIT III

CLASS ASSIGNMENT SHEET #2 — WRITE A WORK SCHEDULE

NAME ______________________________ SCORE ______________

Organizing the work of the employees supervised is one of the responsibilities of the food service supervisor. Having a work schedule for each position is helpful in carrying out this responsibility.

Following the example given below, write your work schedule. Use the form provided on the following page.

EXAMPLE:

WORK SCHEDULE

Name:

Hours: 5:30 A.M. to 2:00 P.M.
30 min for breakfast
15 min for coffee break

Job title: Cafeteria counter worker — no. 1
Days off:
Time and duties:

Supervised by:
Relieved by:

5:30 to 6:30 A.M.:

1. Read breakfast menu
2. Ready equipment for breakfast meal
   - a. Turn on heat in cafeteria counter units for hot foods, grill, dish warmers, etc.
   - b. Prepare counter units for cold food
   - c. Obtain required serving utensils and put in position for use
   - d. Place dishes where needed, those required for hot food in dish warmer
3. Make coffee (consult supervisor for instructions and amount to be made)
4. Fill milk dispenser
5. Obtain food items to be served cold: fruit, fruit juice, dry cereals, butter, cream, etc. Place in proper location on cafeteria counter
6. Obtain hot food and put in hot section of counter
7. Check with supervisor for correct portion sizes if this has not been decided previously

6:30 to 8:00 A.M.:

1. Open cafeteria doors for breakfast service
2. Check meal tickets, volunteer lists, guest tickets; collect cash as directed by supervisor
3. Replenish cold food items, dishes, and flatware
4. Notify cook before hot items are depleted
5. Make additional coffee as needed
6. Keep counters clean, wipe up spilled food

8:00 to 8:30 A.M.: Eat breakfast

8:30 to 10:30 A.M.:

1. Break down serving line and return leftover foods to refrigerators and cook's area as directed by supervisor
2. Clean equipment, serving counters, and tables in dining area
3. Prepare serving counters for coffee break period
   - a. Get a supply of cups, saucers, and flatware
   - b. Make coffee
   - c. Fill cream dispensers
   - d. Keep counter supplied during the coffee break period (9:30-10:30)
4. Fill salad dressing, relish, and condiment containers for noon meal

10:30 to 11:30 A.M.:

1. Confer with supervisor regarding menu items and portion sizes for noon meal
2. Clean equipment, counters, and tables in dining area
3. Prepare counters for lunch
   - a. Turn on heat in hot counter and dish warmers
   - b. Set out tea bags, cream, ice cups, glasses
   - c. Place serving utensils and dishes in position for use
4. Make coffee
5. Fill milk and clean dispensers
6. Set portioned cold foods on cold counter

11:30 to 11:45 A.M.: Coffee break

11:45 A.M. to 1:30 P.M.:

1. Open cafeteria doors for noon meal service
2. Replenish cold food items, dishes, and flatware as needed
3. Keep counters clean; wipe up spilled food
4. Make additional coffee as needed

1:30 to 2:00 P.M.:

1. Turn off heating and cooling elements in serving counters
2. Help break down serving line
3. Return leftover foods to proper places
4. Serve late lunches to doctors and nurses
5. Clean equipment and serving counter as directed by supervisor

2:00 P.M. Off duty

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CLASS ASSIGNMENT SHEET #2

WORK SCHEDULE

Name: ______________________ Hours: ______________________

Job title: ______________________ Supervised by: ______________________

Days off: ______________________ Relieved by: ______________________

Time and duties:

CLASS ASSIGNMENT SHEET #2

PERSONNEL MANAGEMENT SKILLS
UNIT III

ANSWERS TO CLASS ASSIGNMENT SHEETS

Class Assignment Sheet #1 — Evaluated to the satisfaction of the class instructor

Class Assignment Sheet #2 — Evaluated to the satisfaction of the class instructor

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PERSONNEL MANAGEMENT SKILLS
UNIT III

CLINICAL ASSIGNMENT SHEET #1 — ANALYZE A JOB DESCRIPTION

NAME ______________________________ SCORE ______________

Even though job descriptions are written for all the positions in a department, they should be evaluated periodically and updated to reflect any changes that may have occurred.

Review your own job description where you are now employed. Analyze its accuracy for the actual job performed. Write your answers to the following questions.

A. Does your written job description fit your job position? ______________________

What parts of the description do not fit? ______________________________

____

____

____

B. What changes does the written job description need to describe your job accurately?

____

____

____

____

____

____

____

____

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____

____

PERSONNEL MANAGEMENT SKILLS
UNIT III

CLINICAL ASSIGNMENT SHEET #2 — EVALUATE A PREEMPLOYMENT INTERVIEW

NAME ______________________________ SCORE ____________

Effective selection of employees is the first step in building a competent staff. The preemployment interview must be carefully planned and conducted in order for effective selection to occur.

After you conduct a preemployment interview as assigned by your clinical instructor, write your comments for each of the following questions.

A. Did the applicant fill out an application blank? ____________________

B. Did you make the applicant feel at ease? ____________________

C. Was the interview conducted in an atmosphere of privacy and free from tension or interruption?

D. What did you observe about personal characteristics and reactions? ____________________

E. What previous training or work experience did the applicant have for the job? ____________________

CLINICAL ASSIGNMENT SHEET #2

F. Why did the applicant leave the last job? ____________________

____

____

G. Did you use the job description to explain the job position to applicant? ____________________

____

____

H. Did you allow the applicant to ask questions? ____________________

____

____

I. Were references investigated? ____________________

____

____

PERSONNEL MANAGEMENT SKILLS
UNIT III

CLINICAL ASSIGNMENT SHEET #3 — COMPLETE AN EMPLOYEE ORIENTATION FORM

NAME ______________________________ SCORE ______________

An orientation that is planned and conducted well contributes to employee satisfaction and improves employee performance.

Complete an employee orientation form on an employee assigned by your clinical instructor after orienting that employee to the dietary department. Use the example form on the following page or the form used in your institution.

104-E

CLINICAL ASSIGNMENT SHEET #3

SUPERVISOR'S ORIENTATION FOR DIETARY PERSONNEL

Name of employee ____________ Date employed ____________ Date orientation completed ____________

Supervisor: ______________________________
Name

Area	Date Discussed	Comments
Organization, objectives, policies		
Introduction to staff		
Personnel policies		
Pay period		
Wages Work hours		
Sick leave Vacation		
Leave of absence		
Uniforms and dress		
Personal appearance		
Health insurance		
Life insurance		
Social Security		
Retirement		
Change of address		
Use of telephone		
Work performance review		
Disciplinary action		
Health exam Dates Preemployment physical _____ Chest X ray _____		
Job description and work schedule		
Time schedule		
List of work procedures for the position		

____
Supervisor's Signature

Used with permission of the California Department of Public Health, Berkeley, California.

PERSONNEL MANAGEMENT SKILLS
UNIT III

CLINICAL ASSIGNMENT SHEET #4 — ANALYZE A WORK SCHEDULE

NAME ______________________ SCORE ____________

Work schedules should be evaluated periodically to ensure that they accurately reflect current duties and time requirements.

Review your own work schedule. Analyze its accuracy for the actual schedule used. Write your answers to the following questions.

A. Does your written work schedule fit your job position? ____________

B. What changes does the written work schedule need to fit your job accurately? ______

PERSONNEL MANAGEMENT SKILLS
UNIT III

CLINICAL ASSIGNMENT SHEET #5 — TRAIN AN EMPLOYEE, USING THE FOUR-STEP TRAINING PLAN

NAME ______________________________ SCORE ______________

Food service employees must be trained to perform a variety of specific tasks. Responsibility for carrying out this training is frequently assigned to the food service supervisor. The four-step training plan is an effective approach to training an employee to perform a specific task.

Train an employee in a specific task as assigned by your clinical instructor, using the four-step training plan. Describe how you completed each of the steps.

A. Prepare worker ______________________________

____

____

____

B. Present operation ______________________________

____

____

____

C. Have worker perform job under supervision ______________________________

____

____

____

D. Follow up worker's performance ______________________________

____

____

____

PERSONNEL MANAGEMENT SKILLS
UNIT III

CLINICAL ASSIGNMENT SHEET #6 — COMPLETE AN EMPLOYEE PERFORMANCE EVALUATION

NAME ______________________________ SCORE ______________

It is very important to document employee performance accurately. Such documentation may be used as evidence in settling disputes or law suits concerning whether or not an employee has been treated fairly and legally. The following exercises will give you practice in documenting employee performance.

PART I

Complete a performance evaluation on an employee as assigned by your clinical instructor. Use the form provided on the following page or the form used in your institution. Write your answers to the following questions.

A. Did you find it difficult to talk about performance? ______________

B. What problems were noted? ______________

C. What positive reinforcement did the employee receive from the performance evaluation?

CLINICAL ASSIGNMENT SHEET #6

TABLE 12-2. PERFORMANCE RATING REPORT FOR FOOD SERVICE EMPLOYEES*

Employee's Name ______________________________ Date ______________________________

Place a check by the statement that best describes the employee; *underline* any statement that is especially important or applicable.

Cooperation
_________ Has "that's not my job" attitude — won't do more than minimum.
_________ A valuable team member — goes out of his or her way to make unit run smoothly.
_________ Can't always be sure — may or may not cooperate.
_________ Willingly does his or her share and often does more.
_________ Usually willing and able to cooperate with others.
Comments:

Adaptability
_________ Will change duties in emergency.
_________ Cooperates but grumbles when changed from usual job duties.
_________ Assumes personal responsibility for job — changes duties without hesitation.
_________ Accepts necessary changes good naturedly.
_________ Fails to cooperate when changed from usual job duties.
Comments:

Interest in Doing a Good Job
_________ Can always be found working diligently at assignment.
_________ Kills time or loafs — requires constant watching.
_________ Carries out assignments without constant supervision.
_________ Stays busy if closely supervised.
_________ Never wastes time — a real "self-starter."
Comments:

Initiative
_________ Sometimes hesitant to accept suggestions — must be led by others.
_________ Follows new methods willingly — makes good suggestions.
_________ Resists trying new methods — shows no interest in job improvement.
_________ Finds better ways to do work — seems eager to try new methods.
_________ Plans own work satisfactorily — will follow new methods when requested.
Comments:

Following Directions
_________ Carries out instructions completely — knows when to ask directions and when to go on own.
_________ Follows procedures and directions satisfactorily — seems to understand instructions.
_________ Does not follow instructions or procedures consistently — sometimes acts on own without proper authority.
_________ Follows procedures to best of ability — needs repeated instructions.
Comments:

Maintenance of Food Service Standards
_________ Has demonstrated carelessness in food preparation or service — doesn't serve food at proper or ideal condition.
_________ Takes pride in seeing that food is prepared and served in most attractive and best condition — notes and takes action if food is not correct for service.
_________ Not very attentive to food quality, appearance, or temperature.
_________ Good interest and knowledge of food — follows preparation and handling policies well.
_________ Follows food service procedures as outlined.
Comments:

Housekeeping
_________ Works neatly and does own share of cleaning.
_________ Sometimes avoids doing fair share of cleaning.
_________ Never waits to be told about housekeeping duties — takes pride in appearance of unit.
_________ Good "clean as you go" work habits — follows cleaning routines diligently.
_________ Work habits are careless or untidy. Ignores cleaning responsibilities.
Comments:

Attention to Detail
_________ Works with care — seldom makes mistakes.
_________ Produces satisfactory work on routine tasks.
_________ Makes more errors than normal — work needs careful checking.
_________ Makes too many mistakes — works carelessly or ignores details of job.
_________ Works with consistent accuracy — rarely makes errors — is alert in discovering and reporting problems or errors.
Comments:

Relations with Supervisor
_________ Goes out of way to cooperate — can always rely on receiving his or her support.
_________ Seems uncooperative or antagonistic.
_________ Keeps supervisor informed of important details — cooperates willingly.
_________ Seems willing to work with supervisor.
_________ Shows little interest in cooperating with supervisor — may or may not cooperate.
Comments:

Sensitivity to Need of Others (Patients, Patrons)
_________ Does not always seem aware of the needs of others.
_________ Always alert to needs of others — goes out of way to be helpful.
_________ Seems willing to do all he or she can for others.
_________ Indifferent toward patients, patrons, or fellow workers. Looks out for self.
_________ Makes good impression on those he or she serves.
Comments:

CLINICAL ASSIGNMENT SHEET #6

Personal Appearance
________Usually neatly groomed.
________Somewhat careless, occasionally must be reminded.
________Outstanding in personal habits and neatness.
________Always neatly groomed.
________Personal neatness must be improved.
Comments:

Personal Conduct
________Has not shown mature behavior — has shown temper, deliberately disobeyed rules, and has disputes with co-workers.
________Shows mature behavior — respected by group.
________Needs occasional reminder about rules of conduct.
________Always even-tempered and well-mannered — helps to boost morale of group.
________Shows good manners at work — tries to follow rules.
Comments:

Dependability
________Good attendance record — rarely late
________Attendance record is average.
________Frequently tardy — attendance record could show improvement.
________Takes personal responsibility in seeing job is covered — never abuses leave privileges.
________Tends toward incorrect usage of leave privileges (absences before/after day off, absences on weekends/holidays, habitually late, fails to communicate with supervisor properly when absent.)
Comments:

Rater's Signature ________________________ Position ________________________

Employee's Signature ________________________ Date ________________________

*Source: Los Angeles County Medical Center.

PART II

Ask your clinical instructor to discuss with you the following forms as they are used in your facility:

Incident report form
Counseling report form
Disciplinary action form
Grievance form

Complete the forms as assigned by the clinical instructor.

BEST COPY AVAILABLE

PERSONNEL MANAGEMENT SKILLS
UNIT III

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #4 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #5 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #6 — Evaluated to the satisfaction of the clinical instructor

PERSONNEL MANAGEMENT SKILLS
UNIT III

TEST

NAME ______________________________ SCORE ______________

1. Select from the following list the tools of personnel management. Write an "X" in the blank before each correct answer.

_____a. Performance evaluation

_____b. Employee retirement plan

_____c. Grievance form

_____d. Counseling report form

_____e. Job description of each position managed

_____f. Disciplinary action form

_____g. Preemployment interview

_____h. W-2 forms

_____i. Incident report form

_____j. Work schedule of assignments

_____k. Employee orientation plan

_____l. Diet manual

_____m. Training plan

2. State three purposes of a job description.

a. ______________________________

b. ______________________________

c. ______________________________

3. Select from the following list items included in a job description. Write an "X" in the blank before each correct answer.

_____a. Qualifications

_____b. Supervision

TEST

______c. Grievance procedure

______d. Job title

______e. Job location

______f. Job code or number

______g. Job summary

______h. Performance requirements

______i. Relation to other jobs

4. State the purposes of a preemployment interview.

a. ____

b. ____

5. Select from the following list guidelines for preemployment interviews. Write an "X" in the blank before each correct answer.

______a. Provide privacy and freedom from tension

______b. Find out if applicant has small children

______c. Be friendly

______d. Help applicant feel at ease

______e. Determine if applicant has a car

______f. Observe personal characteristics and reactions

______g. Investigate references

______h. Request a photo

______i. Obtain information about previous training or work experience

______j. Obtain information about why applicant left previous job

______k. Obtain age and marital status

______l. Provide application form to be filled out by applicant before beginning interview

______m. Use job description to provide information to applicant about position

TEST

6. List ways to advertise job openings.

a. ______________________________

b. ______________________________

c. ______________________________

7. State steps for orientation of new employees.

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

e. ______________________________

f. ______________________________

8. Select from the following list items to include in preparing a work schedule of assignments. Write an "X" in the blank before each correct answer.

_____a. Name

_____b. Date paid

_____c. Days off

_____d. Job title

_____e. Hours

_____f. Holiday schedule

_____g. Duties and timing of duties

_____h. Supervisor

9. Arrange in order steps in a four-step training program. Write a "1" before the first step, a "2" before the second step, and so on.

_____a. Follow up worker's performance

_____b. Present operation

_____c. Prepare worker

_____d. Have worker perform job under supervision

TEST

10. Describe development of a training plan.

    a. Preplanning — ______________________________
    ____

    b. Setting the stage — ______________________________
    ____

    c. Employee feedback — ______________________________
    ____

    d. Employee awareness — ______________________________
    ____

    e. Competition — ______________________________
    ____

11. Select from the following list goals of a performance evaluation. Write an "X" in the blank before each correct answer.

    _____a. Make employee feel insecure

    _____b. Build good relationship based on mutual confidence between management and employee

    _____c. Give supervisor a sense of superiority

    _____d. Identify areas where employee is doing outstanding work

    _____e. Provide setting for employee to ask questions

    _____f. Compare one employee to another employee

    _____g. Identify areas where improvement is desirable

    _____h. Clear up any misunderstandings about what is expected of employee

12. State three ways to recognize outstanding work performance.

    a. ______________________________

    b. ______________________________

    c. ______________________________

TEST

13. State three ways to correct unsatisfactory work performance.

a. ____________________

b. ____________________

c. ____________________

(NOTE: Test questions 14-21 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

14. Write a job description.

15. Write a work schedule.

16. Analyze a job description.

17. Evaluate a preemployment interview.

18. Complete an employee orientation form.

19. Analyze a work schedule.

20. Train an employee, using the four-step training plan.

21. Complete an employee performance evaluation.

PERSONNEL MANAGEMENT SKILLS
UNIT III

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 553. The point total for questions 1-13 is 183; the point total for questions 14-21 is 370.)

1. (26 points)

   a, c, d, e, f, g, i, j, k, m

2. (9 points)

   Answer should include any three of the following

   a. Lists duties in a specific job position

   b. Shows required skills and responsibilities

   c. Shows job relationships

   d. Aids in matching qualified applicant to job position

3. (18 points)

   a, b, d, e, f, g, h, i

4. (6 points)

   a. Employer can determine fitness of applicant for job opening

   b. Applicant can determine interest in the position and facility by information provided

5. (26 points)

   a, c, d, f, g, i, j, l, m

6. (3 points)

   a. Place newspaper ads

   b. Post notices on school bulletin boards

   c. Encourage word of mouth

ANSWERS TO TEST

7. (18 points)

   a. Tour dietary department

   b. Introduce new employee to other employees

   c. Explain organizational chart, job description, and work schedule

   d. Explain personnel policies

   e. Explain time schedule or duty schedule

   f. Allow employee to ask questions

8. (16 points)

   a, c, d, e, g, h

9. (12 points)

   a. 4

   b. 2

   c. 1

   d. 3

10. (15 points)

    Description should include the following

    a. Preplanning — Involve employees in preplanning stage

    b. Setting the stage — Conduct training in an area that is a familiar setting to employees

    c. Employee feedback — Encourage employees to talk about specific problem areas during training

    d. Employee awareness — Help employees become aware of common objectives and common problems

    e. Competition — Stimulate healthy competition and achievement

11. (16 points)

    b, d, e, g, h

ANSWERS TO TEST

12. (9 points)

    Answer should include any three of the following

    a. Identify a job that is completed correctly

    b. Praise employee for outstanding work

    c. Give certificates or citations for outstanding performance

    d. Give public acknowledgement of outstanding work

13. (9 points)

    Answer should include any three of the following

    a. Counsel employee concerning a job that is unsatisfactory

    b. Emphasize the job to be corrected and not the person involved

    c. Correct unsatisfactory performance as soon as possible

    d. Correct a worker as many times as necessary until correct procedure becomes part of the employee's habit

14. Evaluated to the satisfaction of the class instructor (35 points)

15. Evaluated to the satisfaction of the class instructor (35 points)

16. Evaluated to the satisfaction of the clinical instructor (25 points)

17. Evaluated to the satisfaction of the clinical instructor (50 points)

18. Evaluated to the satisfaction of the clinical instructor (50 points)

19. Evaluated to the satisfaction of the clinical instructor (25 points)

20. Evaluated to the satisfaction of the clinical instructor (50 points)

21. Evaluated to the satisfaction of the clinical instructor (100 points)

REGULATIONS
UNIT IV

UNIT OBJECTIVE

After completing this unit, the student should be able to survey the dietary department for compliance with regulatory agency standards. This knowledge will be shown by completing the assignment sheet and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Name regulating agencies that affect the dietary department.
2. Select from a list general standards for a dietary department.
3. Discuss standards for dietary personnel.
4. Describe standards for adequacy of diet.
5. Select from a list standards for therapeutic diets.
6. Select from a list standards for menu planning.
7. Select from a list standards for food preparation and service.
8. Select from a list dietary department sanitation standards.
9. Describe dietary department safety standards.
10. State standards for patient care.
11. Discuss the purpose of a quality assurance program.
12. Survey the dietary department for compliance with regulatory standards.

REGULATIONS
UNIT IV

SUGGESTED ACTIVITIES

I. Suggested activities

  A. Order materials to supplement unit.

    1. Survey form and copy of standards for the dietary department from State Department of Health

       (NOTE: Oklahoma teachers can order survey form and copy of standards from the Oklahoma State Department of Health, P.O. Box 53551, Oklahoma City, Oklahoma 73152. Out-of-state teachers should consult their respective State Departments of Health.)

    2. Survey form and copy of standards for the dietary department from the Joint Commission on Accreditation of Hospitals. Available from the Joint Commission on Accreditation of Hospitals, 875 N. Michigan Avenue, Chicago, Illinois 60611.

    3. Survey form from City or County Health Department

       (NOTE: Oklahoma teachers can order survey form from Oklahoma City-County Health Department, 921 N.E. 23rd, Oklahoma City, Oklahoma 73103. Out-of-state teachers should consult their respective City or County Health Departments.)

    4. Copies of standards for Title XVIII (Medicare) and Title XIX (Medicaid) from State Department of Health

       (NOTE: Oklahoma teachers can order copies of standards from the Oklahoma State Department of Health, P.O. Box 53551, Oklahoma City, Oklahoma 73152. Out-of-state teachers should consult their respective State Departments of Health.)

  B. Provide students with objective sheet.

  C. Provide students with information and assignment sheets.

  D. Discuss unit and specific objectives.

  E. Discuss information and assignment sheets.

  F. Develop appropriate learning activities for special needs students.

  G. Discuss in class the standards and survey form for the dietary department from Joint Commission on Accreditation of Hospitals.

  H. Discuss in class the standards for Title XVIII (Medicare) and Title XIX (Medicaid) and the survey forms used by the State Department of Health for surveying dietary departments.

SUGGESTED ACTIVITIES

- I. Discuss in class the standards and the survey form used by the City or County Department of Health for surveying dietary departments.
- J. Give test.
- K. Reteach if necessary.

II. Instructional materials

- A. Objective sheet
- B. Suggested activities
- C. Information sheet
- D. Clinical Assignment Sheet #1 — Survey the Dietary Department for Compliance with Regulatory Standards
- E. Answers to clinical assignment sheet
- F. Test
- G. Answers to test

III. Unit references

- A. *Accreditation Manual for Hospitals 1982 Edition.* Chicago, Illinois: Joint Commission on Accreditation of Hospitals, 1982.
- B. McPharlin, Roberta C. *Quality Assurance: Documented Quality Control in Your Food Service Operation.* San Antonio, Texas: Abstract of presentation during 65th Annual Meeting of the American Dietetic Association, October 18-22, 1982.
- C. Survey form. Oklahoma City, Oklahoma: Oklahoma City-County Health Department, 1982.
- D. Survey form. Oklahoma City, Oklahoma: Oklahoma State Department of Health, 1982.
- E. Survey form. Topeka, Kansas: Kansas State Department of Health, n.d.

REGULATIONS
UNIT IV

INFORMATION SHEET

I. Regulating agencies that affect the dietary department

(NOTE: In addition to the following agencies, a facility may have other contracts with agencies such as Veteran's Administration or Welfare that would survey the dietary department.)

A. Joint Commission on Accreditation of Hospitals (JCAH)

(NOTE: This agency is a private nongovernmental agency that establishes standards for health care facilities and surveys to evaluate compliance. Facilities participate on a voluntary basis.)

B. State Department of Health

(NOTE: This agency conducts surveys for Medicare [Title XVIII] standards.)

C. City or County Health Department

II. General standards for a dietary department (Clinical Assignment Sheet #1)

(NOTE: The statements regarding standards in this unit are general guidelines. For specific details, obtain a copy of the standards or regulations from the appropriate agency.)

A. Is supervised by an individual qualified by training or experience in the management of a dietary department

(NOTE: Various regulating agencies have standards pertaining to training or experience that a supervisor must meet.)

B. Has a written organizational plan

(NOTE: Policies and procedures are written to meet the needs of the facility.)

C. Has written job descriptions for all dietary personnel

D. Is adequately staffed with food service employees who are on duty over a period of twelve or more hours

E. Trains employees to perform duties and participate in in-service education programs

(NOTE: In-service education forms are signed by the dietitian and by each dietary employee attending. Orientation, on-the-job training, and continuing education programs are on file for dietary employees.)

INFORMATION SHEET

F. Does not assign employees duties outside the department unless such duties do not interfere with sanitation, safety, or time required for dietary work.

(CAUTION: Nursing or housekeeping employees must not be assigned to the dietary department after working in their own departments.)

III. Standards for dietary personnel

A. Must be in good health and free from communicable disease

(NOTE: A physical examination form is on file for all dietary personnel. Food handlers' permits are on file where required.)

B. Must wear clean garments and hair restraints

C. Must keep hands and fingernails clean

D. Must not be permitted to work with open infected sores or wounds

IV. Standards for adequacy of diet

A. Nutritional adequacy — Diet provides nutritional value equivalent to the Recommended Dietary Allowances of the Food and Nutrition Board of the National Research Council

(NOTE: Meal plans may include three, four, or five meals per day.)

B. Timing

1. Meals are served at regular times

2. Meals are served so that there is not more than a fourteen-hour span between a substantial evening meal and breakfast

V. Standards for therapeutic diets

A. Diets are served as prescribed by the attending physician

B. Orders are relayed to the dietary department in writing

C. Orders are planned, prepared, and served under supervision or consultation of a qualified dietitian

(NOTE: Menus for therapeutic diets are dated and signed by a qualified dietitian.)

D. Current diet manual approved by the medical staff is available in dietary department and at all nurses' stations

INFORMATION SHEET

E. Personnel responsible for therapeutic diets are sufficiently trained to make appropriate substitutions if necessary

F. Tray identification system is established to ensure that each resident receives the diet ordered

VI. Standards for menu planning

A. Menus are written in advance

(NOTE: Menus should be written at least one week in advance.)

B. Menus are nutritionally adequate

C. Menus are posted in an accessible place

D. Menus provide a sufficient variety of foods served in adequate amounts

E. Records of meals as served are kept on file and maintained for thirty days

F. Menu changes are posted and reason given for change

(NOTE: Menu substitutions must have comparable nutritional value.)

G. Sufficient supply of staple foods is on hand to cover a minimum period of one week; sufficient supply of perishable foods is on hand to cover a minimum period of two days

H. Records of foods as purchased are on file

(NOTE: Invoices are available for food purchases.)

VII. Standards for food preparation and service

A. Foods are prepared by methods that conserve nutritive value, flavor, and appearance

B. Foods are served at the proper temperature

(NOTE: Equipment is provided that will hold hot foods hot and cold foods cold.)

C. Foods are served to meet individual needs

EXAMPLES: Chopped, ground, or pureed as necessary

D. Substitutes are offered if a patient refuses a food

E. Tested recipes are on file and are used to prepare menu items

INFORMATION SHEET

F. Dining room tables and chairs are provided for all patients who can eat in the dining room

G. Sturdy tray stands of the correct height are provided for all bedfast patients

VIII. Dietary department sanitation standards

A. Sanitary conditions are maintained in storage, preparation, and distribution of food

EXAMPLES: Correct temperature maintained in all refrigerators and freezers
Thermometers present
Records of temperatures kept

B. Procedures for effective cleaning of all equipment and work areas are followed consistently

C. Dishwashing procedures and techniques are carried out in accordance with state and local health codes

D. Pot and pan washing procedures and techniques are carried out in accordance with state and local health codes

E. Waste is disposed of by mechanical means and kept in leakproof nonabsorbent containers with tight-fitting lids

F. Waste is disposed of properly, and containers are thoroughly cleaned inside and out each time emptied

G. Dry or staple foods are stored off the floor in a well-ventilated room

H. Dry or staple foods are not subject to water backflow or contamination by condensation, leakage, rodents, or vermin

I. Hand-washing facilities are provided in dietary areas where needed

(NOTE: Facility should include hot and cold water, soap, and individual paper towels.)

J. Hands are properly washed and sanitized before handling clean dishes

K. Ice is stored, handled, and dispensed in a sanitary manner

L. Food is purchased from approved sources

(NOTE: No damaged merchandise or home-processed foods are purchased.)

INFORMATION SHEET

IX. Dietary department safety standards

- A. Walk-in refrigerators and freezers can be opened from the inside at all times
- B. Cleaning supplies are clearly marked
- C. Nonfood items are stored separately from food items
- D. Active participation in a safety program is required, with documentation of participation

X. Standards for patient care

- A. Dietary department personnel visit new patients within twenty-four hours after patient enters facility to check diet order, record food likes and dislikes, and note special problems
- B. Food service supervisor and/or consulting dietitian participate in writing patient care plans
- C. Dietitian records in medical chart as deemed appropriate
- D. Dietitian counsels patient or family member as needed concerning the diet
- E. Dietitian provides consultation to medical, nursing, and other professional staff

XI. Purpose of a quality assurance program — To provide an ongoing, systematic review that focuses on documenting the quality of current care provided, identifying and resolving any problems, and monitoring for improvements and maintenance of high quality

(NOTE: The Joint Commission of Accreditation of Hospitals states that "the quality and appropriateness of nutritional care provided by the dietetic service shall be regularly reviewed and evaluated.")

REGULATIONS
UNIT IV

CLINICAL ASSIGNMENT SHEET #1 — SURVEY THE DIETARY DEPARTMENT FOR COMPLIANCE WITH REGULATORY STANDARDS

NAME ______________________________ SCORE ______________

Using the survey form on the following pages, survey your dietary department for compliance with regulatory standards. After you have completed the survey, discuss with the clinical instructor items that you feel would not have passed a surveying team from a regulating agency.

PART I

Fill in the following information about the person in charge.

		Yes	No
The person in charge is a dietitian		_____	_____
Qualifications:	ADA	_____	_____
	Registered #__________________	_____	_____
	Other	_____	_____
	Full-time	_____	_____
	Part-time	_____	_____
	Consultant	_____	_____
	Days/month_____		
	Hours/day_____		
	Days/week_____		
The person in charge is a representative of a management company		_____	_____

Company name ____

Qualifications (training, experience):

____

____

____

____

____

CLINICAL ASSIGNMENT SHEET #1

PART II

SURVEY REPORT FORM FOR DIETARY DEPARTMENT

Requirements	Yes	No
STAFFING		
Does person in charge		
Participate in regular conference with administrator and department heads?		
Write menus with consultation from a dietitian?		
See that menus are followed?		
See that necessary menu changes are posted?		
Establish high standards for food preparation . . .		
Through use of standardized recipes?		
Through the purchase of quality foods and supplies?		
Through supervision and instruction?		
Participate in selection of food service employees?		
Participate in orientation and training of personnel?		
Participate in medical rounds and conferences?		
Schedule dietary personnel?		
Maintain essential records		
Food cost records?		
Personnel cards?		
Meal census?		
Visit patients?		
Communicate with members of health care team?		
Take responsibility for *total* food service in absence of full-time or consultant dietitian?		

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CLINICAL ASSIGNMENT SHEET #1

SURVEY REPORT FORM FOR DIETARY DEPARTMENT

Requirements	Yes	No
Are consultant dietetic services used?		
Does consultant . . .		
Meet recommended qualifications?		
Write recommendations setting priorities in cooperation with an administrator, food service supervisor, health team members?		
Recommend changes or additions to physical plant, changes in layout, or equipment?		
Determine efficiency of food service and make recommendations for improvement?		
Set priorities in food preparation?		
Provide/recommend source and use of standardized recipes?		
Evaluate food quality at time of visit; make recommendations?		
Check all special diets served when on duty?		
Coordinate the writing of job descriptions?		
Evaluate how menus are followed?		
Evaluate the use of standardized recipes?		
Coordinate the development of food cost control system?		
Teach the dietary supervisors . . .		
To write menus?		
To write routine special diets?		
To give patients dietary consultation through example?		
To contribute to patient care plan through charting?		
Write nonroutine therapeutic diets or give consultation by telephone as necessary?		
Recommend/approve diet manual?		

CLINICAL ASSIGNMENT SHEET #1

SURVEY REPORT FORM FOR DIETARY DEPARTMENT

Requirements	Yes	No
Instruct dietary personnnel . . .		
In importance of preparation of therapeutic diets?		
In food preparation procedures?		
Contribute to nutritional care of patients?		
Chart contribution to patient care plan?		
Visit patients to give dietary consultation?		
Observe sanitary standards?		
Make recommendations for sanitation improvement?		
Promote safety standards?		
Hold in-service training classes in areas of need?		
Is there adequate staffing in dietary?		
Is all necessary work done?		
Are there personnel on duty twelve hours or more daily?		
Is the overall appearance of the kitchen acceptable?		
Are nurse aides not allowed to assist in meal service?		
Is total maintenance of kitchen the responsibility of the dietary staff?		
ORGANIZATION AND SUPERVISION		
Are policies and procedures specific to the needs of the individual facility?		
Are policies and procedures followed as written?		
Are policies written by charge dietitian?		

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CLINICAL ASSIGNMENT SHEET #1

SURVEY REPORT FORM FOR DIETARY DEPARTMENT

Requirements	**Yes**	**No**
Are policies and procedures available to personnel?		
Are policies and procedures reviewed annually?		
Are job descriptions effective?		
Do descriptions give outline of duties?		
Do descriptions give hours to be worked?		
Do descriptions involve statement of who is responsible for what and to whom?		
MENUS AND NUTRITIONAL ADEQUACY		
Do menus meet the daily food guide? EXAMPLE: Milk/dairy — Two or more cups daily Meat — Two or more servings (total 4 to 6 ounces daily) Fruit/vegetable — Two or more servings Bread/cereal — Two or more servings Other foods — For additional calories or to satisfy appetite		
Are menus planned in advance? Menu: ☐ Cycle ______________weeks ☐ Planned weekly ____________weeks in advance		
Do menu portions meet requirements?		
Is menu followed?		
Is food on hand for following day's menu?		
Is there a minimum safe inventory maintained? EXAMPLE: One week's staple food; two days' perishable food		
Are there three meals served and not more than fourteen hours between supper and breakfast?		
Is there a substantial evening meal including a protein food?		

CLINICAL ASSIGNMENT SHEET #1

SURVEY REPORT FORM FOR DIETARY DEPARTMENT

Requirements	**Yes**	**No**
THERAPEUTIC DIETS		
Is a current diet manual available to dietary personnel, nursing, and medical staff? Manual name:______________		
Is manual available in the kitchen?		
Is manual available in nursing stations?		
Is diet manual approved by dietitian and medical staff?		
Does check of___________diet orders on patient charts agree with diet order in kitchen?		
Do foods on tray served agree with physician's orders as checked by diet order?		
Are there variations in portion sizes for different calorie or sodium levels?		
Are written therapeutic menus based on the regular menu?		
Is the written menu for therapeutic diets followed?		
Are therapeutic diets reevaluated periodically to determine if change is needed . . .		
By nursing personnel?		
By the dietitian?		
By the physician?		
Are patients receiving therapeutic diets with physician's orders?		
Is there a written procedure to relay diet order to kitchen?		
Are the patients' diets individualized to meet needs?		
Is the patient instructed on the diet?		
Is diet instruction recorded in medical chart?		
Record the number of diets as follows: ______regular diets ______therapeutic diets ______mechanical alteration ______tube feedings		

CLINICAL ASSIGNMENT SHEET #1

SURVEY REPORT FORM FOR DIETARY DEPARTMENT

Requirements	Yes	No
FOOD PREPARATION AND SERVICE		
Are menus served as posted?		
Are menu changes posted?		
Are reasons given for changes?		
Do menu changes yield comparable nutritional value?		
Is menu nutritionally adequate?		
Are serving portions adjusted to individual needs?		
Does food served meet individual needs? EXAMPLES: Chewing ability, cultural, religious		
Is food handled in a sanitary way?		
Is food protected from contamination and covered in transit?		
Are there adequate methods for maintenance of food at hot or cold temperatures?		
Is perishable food stored at proper temperature, 40°F or below?		
Is frozen food kept frozen?		
Is handling of food minimized by use of suitable utensils?		
Is food cooked to proper temperature?		
Are fruits and vegetables washed thoroughly?		
Are containers of foods stored off floor on clean surfaces?		
Is there no wet storage of packaged food?		
Is a protector device used on display cases?		

CLINICAL ASSIGNMENT SHEET #1

SURVEY REPORT FORM FOR DIETARY DEPARTMENT

Requirements	Yes	No
Are unwrapped or potentially hazardous foods not reused?		
Is sugar kept in closed pouring dispensers or individual packages?		
Are recipes followed?		
Are foods prepared properly? EXAMPLES: Tender meat, properly cooked vegetables		
Are foods cooked at the proper time?		
Are written cleaning schedules followed?		
Are refrigerator and dishwashing temperatures within safe range?		
Are special diets served as ordered?		
Are patients on proper modified diets for current condition?		
Is food served at proper temperature?		
Are meals attractively served?		
Do employees note nonacceptance of food?		
Is an effort made to determine why food was not eaten?		
Are substitutions given for refused food?		
Are special diets served as ordered?		
Is the menu served consistent with physician's orders?		
Is an effort made to teach patients to feed themselves?		
Are self-help devices used?		
Do patients eat in dining room when possible?		
Are bedside tables available for those eating in their rooms?		

CLINICAL ASSIGNMENT SHEET #1

SURVEY REPORT FORM FOR DIETARY DEPARTMENT

Requirements	Yes	No
HYGIENE OF STAFF		
Are high standards of personal hygiene maintained?		
Do employees wear clean outer garments?		
Are proper hair restraints used?		
Are hands and nails clean?		
Are hygienic food-handling techniques practiced?		
Are clean wiping cloths used?		
Are kitchenware and food-contact surfaces of equipment for meats, eggs, and milk properly sanitized?		
Are chopping boards and knives thoroughly cleaned after each use?		
Are hands washed between food handling and handling of equipment?		
Are hand-washing facilities with individual towels provided?		
Are food service employees not assigned duties outside dietary service?		
SANITARY CONDITIONS		
Are storage, preparation, and serving areas clean and orderly?		
Are floors kept clean?		
Are walls clean?		
Are soiled linens stored in proper containers?		
Is refrigeration maintained at accepted temperatures?		
Is leftover food stored in an acceptable manner?		
Are containers covered and labeled with date?		
Is leftover food stored in shallow containers?		
Is food stored 12 inches above the floor?		

CLINICAL ASSIGNMENT SHEET #1

SURVEY REPORT FORM FOR DIETARY DEPARTMENT

Requirements	**Yes**	**No**
Are garbage and waste disposed of in an acceptable manner?		
Are garbage cans washable?		
Do garbage cans have tight-fitting lids?		
Are foods stored off the floor and in a ventilated room?		
Are effective procedures used for cleaning all equipment and wall areas?		
Are disinfectant and hot water used?		
Are hand-washing facilities provided?		
Are there individual towels provided in restroom?		
Is a file kept of all inspection reports with documentation of the action taken?		
Is ventilation suitable for efficient dietetic service?		
Is the kitchen reasonably free from steam, smoke, condensation?		
Is steam equipment vented to the outside?		
Are hoods properly designed?		
Are filters removable?		
Is equipment suitable for efficient dietetic service?		
Is tableware clean to the sight?		
Are grills and other cooking equipment cleaned daily?		
Is all equipment capable of being cleaned?		
Is equipment in good repair?		

Adapted with permission of the Kansas State Health Department.

REGULATIONS
UNIT IV

ANSWERS TO CLINICAL ASSIGNMENT SHEET

Evaluated to the satisfaction of the clinical instructor

REGULATIONS
UNIT IV

TEST

NAME ______________________________ SCORE ____________

1. Name regulating agencies that affect the dietary department.

   a. ______________________________

   b. ______________________________

   c. ______________________________

2. Select from the following list general standards for a dietary department. Write an "X" in the blank before each correct answer.

   _____a. Is adequately staffed with food service employees who are on duty over a period of twelve or more hours

   _____b. Has written job descriptions for all dietary personnel

   _____c. Does not require food service employees to participate in in-service education classes

   _____d. Has a written organizational plan

   _____e. Assigns nursing or housekeeping employees to the dietary department

   _____f. Does not assign employees duties outside the department unless such duties do not interfere with sanitation, safety, or time required for dietary work

   _____g. Does not provide orientation or on-the-job training for dietary employees

3. Discuss standards for dietary personnel.

   ____

   ____

   ____

   ____

TEST

4. Describe standards for adequacy of diet.

   a. Nutritional adequacy — ______________________________

   ____

   ____

   ____

   ____

   b. Timing

      1) ______________________________

      ____

      2) ______________________________

      ____

5. Select from the following list standards for therapeutic diets. Write an "X" in the blank before each correct answer.

   ______a. Current diet manual approved by the medical staff is available in dietary department and all nurses' stations

   ______b. Tray identification system is not necessary if the nurse aides know the patients and can deliver the trays accurately

   ______c. Diets are served as prescribed by the attending physician

   ______d. Orders are relayed verbally from charge nurse to food service supervisor

   ______e. Orders are planned, prepared, and served under supervision or consultation of a qualified dietitian

   ______f. Personnel responsible for therapeutic diets are sufficiently trained to make appropriate substitutions if necessary

6. Select from the following list standards for menu planning. Write an "X" in the blank before each correct answer.

   ______a. Menus are nutritionally adequate

   ______b. Records of meals as served are kept on file and maintained for one year

   ______c. Menus are written in advance

   ______d. Menu changes are posted and reason given for change

TEST

______e. Portion control is occasionally practiced when serving food

______f. Menus provide a sufficient variety of foods served in adequate amounts

______g. Records of foods as purchased are on file

______h. Sufficient supply of staple foods is on hand to cover a minimum period of two days; sufficient supply of perishable foods is on hand to cover a minimum period of one week

______i. Records of meals as served are kept on file and maintained for thirty days

______j. Invoices of foods purchased are not on file

______k. Menus are posted in an accessible place

7. Select from the following list standards for food preparation and service. Write an "X" in the blank before each correct answer.

______a. Foods are served to meet individual needs

______b. Tested recipes are on file and are used to prepare menu items

______c. Sturdy tray stands of the correct height are provided for all bedfast patients

______d. Foods are served at the proper temperature

______e. Substitutions are not offered if the patient refuses the food served

______f. Dining room tables and chairs are provided for all patients who can eat in the dining room

______g. Foods are prepared by methods that conserve nutritive value, flavor, and appearance

______h. Standardized recipes are not necessary

______i. Trays are served rapidly so that it is not necessary to have special equipment to keep hot foods hot and cold foods cold

8. Select from the following list dietary department sanitation standards. Write an "X" in the blank before each correct answer.

______a. Ice is stored, handled, and dispensed in a sanitary manner

______b. Hands are washed but need not be sanitized before handling clean dishes

______c. Food is purchased from approved sources

TEST

_____d. Home-processed foods are used in the facility

_____e. Sanitary conditions are maintained in storage, preparation, and distribution of food

_____f. Dishwashing procedures and techniques are carried out in accordance with state and local health codes

_____g. Thermometers are present in some refrigerators and freezers

_____h. Waste is disposed of properly, and containers are thoroughly cleaned inside and out each time emptied

_____i. Dry or staple foods are stored off the floor in a well-ventilated room

_____j. Pot and pan washing procedures and techniques are carried out in accordance with state and local health codes

_____k. Hand-washing facilities are provided in dietary areas where needed

_____l. Waste is disposed of by mechanical means and kept in leakproof nonabsorbent containers with tight-fitting lids

9. Describe dietary department safety standards.

a. ______________________________

____

b. ______________________________

____

c. ______________________________

____

d. ______________________________

____

10. State standards for patient care.

a. ______________________________

____

b. ______________________________

____

TEST

c. ____________________

____

d. ____________________

____

e. ____________________

____

11. Discuss the purpose of a quality assurance program.

____

____

____

____

(NOTE: Test question 12 lists the assignment sheet. It is an important part of this test. If it has not been completed, check with your instructor.)

12. Survey the dietary department for compliance with regulatory standards.

REGULATIONS
UNIT IV

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 248. The point total for questions 1-11 is 148; the point total for question 12 is 100.)

1. (9 points)
   a. Joint Commission on Accreditation of Hospitals (JCAH)
   b. State Department of Health
   c. City or County Health Department

2. (12 points)

   a, b, d, f

3. (8 points)

   Discussion should include the following

   a. Must be in good health and free from communicable disease
   b. Must wear clean garments and hair restraints
   c. Must keep hands and fingernails clean
   d. Must not be permitted to work with open infected sores or wounds

4. (9 points)

   Description should include the following

   a. Nutritional adequacy — Diet provides nutritional value equivalent to the Recommended Dietary Allowances of the Food and Nutrition Board of the National Research Council
   b. Timing
      1) Meals are served at regular times
      2) Meals are served so that there is not more than a fourteen-hour span between a substantial evening meal and breakfast

ANSWERS TO TEST

5. (12 points)

   a, c, e, f

6. (21 points)

   a, c, d, f, g, i, k

7. (18 points)

   a, b, c, d, f, g

8. (27 points)

   a, c, e, f, h, i, j, k, l

9. (12 points)

   Description should include the following

   a. Walk-in refrigerators and freezers can be opened from the inside at all times

   b. Cleaning supplies are clearly marked

   c. Nonfood items are stored separately from food items

   d. Active participation in a safety program is required, with documentation of participation

10. (15 points)

   a. Dietary department personnel visit new patients within twenty-four hours after patient enters facility to check diet order, record food likes and dislikes, and note special problems

   b. Food service supervisor and/or consulting dietitian participate in writing patient care plans

   c. Dietitian records in medical chart as deemed appropriate

   d. Dietitian counsels patient or family member as needed concerning the diet

   e. Dietitian provides consultation to medical, nursing, and other professional staff

ANSWERS TO TEST

11. (5 points)

Discussion should include the following

To provide an ongoing, systematic review that focuses on documenting the quality of current care provided, identifying and resolving any problems, and monitoring for improvements and maintenance of high quality

12. Evaluated to the satisfaction of the clinical instructor (100 points)

POLICIES AND PROCEDURES
UNIT V

UNIT OBJECTIVE

After completing this unit, the student should be able to explain the purpose of policies and procedures and to assist in writing a policy and a procedure. This knowledge will be shown by completing the assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Distinguish between a policy and a procedure.
2. Select from a list reasons for written policies and procedures.
3. Discuss problems associated with unwritten policies and procedures.
4. Select from a list suggested sections in a dietary policy and procedure manual.
5. Select from a list possible policies and procedures for patient food service.
6. State tips for writing a policy and procedure manual.
7. Arrange in order steps in developing dietary policies and procedures.
8. Locate information in the dietary policy and procedure manual.
9. Write policies and procedures correctly.

POLICIES AND PROCEDURES
UNIT V

SUGGESTED ACTIVITIES

I. Suggested activities

   A. Order materials to supplement unit.

   B. Provide students with objective sheet.

   C. Discuss unit and specific objectives.

   D. Provide students with information and assignment sheets.

   E. Discuss information and assignment sheets.

   F. Develop appropriate learning activities for special needs students.

   G. Ask students to bring a copy of one policy and procedure from the dietary policy and procedure manual in their facility. Discuss the different formats in which the policies and procedures are written.

   H. Give test.

   I. Reteach if necessary.

II. Instructional materials

   A. Objective sheet

   B. Suggested activities

   C. Information sheet

   D. Class Assignment Sheet #1 — Write a Policy and a Procedure

   E. Answers to class assignment sheet

   F. Clinical assignment sheets

      1. Clinical Assignment Sheet #1 — Locate Information in the Dietary Policy and Procedure Manual

      2. Clinical Assignment Sheet #2 — List the Topics Covered by Sanitation and Safety Section of the Dietary Policy and Procedure Manual

      3. Clinical Assignment Sheet #3 — Write Policies and Procedures Correctly

SUGGESTED ACTIVITIES

- G. Answers to clinical assignment sheets
- H. Test
- I. Answers to test

III. Unit references

- A. Hensler, E. *Suggestions for Outline of Policy and Procedure Manual.* Oklahoma City, Oklahoma: Oklahoma State Department of Health, 1972.
- B. U.S. Department of Health, Education, and Welfare. *A Guide to Nutrition and Food Service.* Washington, D.C.: U.S. Government Printing Office, 1971.
- C. West, B.B., et al. *Food Service in Institutions,* 5th ed. New York: John Wiley and Sons, Inc., 1977.

POLICIES AND PROCEDURES
UNIT V

INFORMATION SHEET

I. Terms and definitions

   A. Policy — Definite course of action selected to guide decisions

      (NOTE: Policies provide a guide for future action. They tell us what can be done or what should be done.)

   B. Procedure — Step-by-step description for doing something

      (NOTE: Procedures tell the essential steps or ways the policies are to be implemented.)

II. Reasons for written policies and procedures

   A. Serve as a central source for adding, changing, or deleting procedures

   B. Promote teamwork

   C. Free supervisor from answering repetitive questions

   D. Avoid favoritism

   E. Avoid misunderstanding

   F. Provide excellent information for training programs

   G. Serve as documents for surveying agencies

III. Problems associated with unwritten policies and procedures

   A. Lead to individual interpretation

   B. Change when personnel change

   C. Leave too much to memory

IV. Suggested sections in a dietary policy and procedure manual (Clinical Assignment Sheet #1)

   (NOTE: These are only suggestions, not a complete list. The individual facility determines written policies and procedures.)

   A. Personnel policies

INFORMATION SHEET

   B. Organization

      (NOTE: This section may include job descriptions and work schedules.)

   C. Budget development

   D. Menu planning

   E. Therapeutic menus

      (NOTE: Policies and procedures for diet orders may be included in this section.)

   F. Patient food service

   G. Food purchasing and storing

   H. Food preparation

   I. Sanitation and safety

   J. In-service education

   K. Record keeping

   L. Disaster planning

V. Possible policies and procedures for patient food service (Clinical Assignment Sheet #2)

   (NOTE: These are only examples and do not make a complete list.)

   A. Mealtimes

   B. Type of tray service

   C. Tray assembly

   D. Temperature of food during serving

   E. Temperature of food when patient receives it

   F. Substitutions if patient dislikes a menu item

   G. Patient visitation

   H. Patient diet instruction

   I. Food brought in by family or friends

INFORMATION SHEET

VI. Tips for writing a policy and procedure manual (Class Assignment Sheet #1; Clinical Assignment Sheet #3)

- A. Policies
  1. Include one policy per page and one subject per policy
  2. Write clear, concise statements
  3. Make sure that policies are practical and possible to achieve
- B. Procedures
  1. Include all steps from beginning to end
  2. State purpose of the work
  3. State who is responsible for accomplishing procedure
  4. Use short sentences, and make concise statements

VII. Steps in developing dietary policies and procedures

- A. Dietitian or dietary consultant and food service supervisor develop preliminary draft
- B. Dietary department personnel have input
- C. Administrator reviews policy and procedure
- D. Dietitian and food service supervisor write final draft and have it approved by administrator
- E. Policies and procedures are placed in a three-ring notebook

  (NOTE: Using a three-ring notebook is helpful in changing or updating a policy and procedure manual. Other methods are also acceptable.)

POLICIES AND PROCEDURES
UNIT V

CLASS ASSIGNMENT SHEET #1 — WRITE A POLICY AND A PROCEDURE

NAME ________________________________ SCORE ______________

In order to be effective, policies and procedures must be well written.

Using the example given on the following page, write a policy and procedure. State the policy, the purpose, the person responsible, and the procedure. The topic of the policy you will write will be assigned by the classroom instructor.

(NOTE: You may find it helpful to refer to Section VI on the Information Sheet for tips on writing policies and procedures.)

CLASS ASSIGNMENT SHEET #1

EXAMPLE:

UNIFORMS AND PERSONAL APPEARANCE

POLICY: All dietary employees will wear white or pastel uniforms and be neat in appearance at all times.

PURPOSE: To ensure that all employees have uniform dress and look neat on duty.

PERSON RESPONSIBLE: Food Service Director

PROCEDURE:

1. Female food service personnel will wear white or pastel uniforms. These uniforms should be made from a blend of fibers. All-nylon uniforms are not acceptable. Pant suits are acceptable.
2. Male food service personnel should wear white or pastel uniforms.
3. Female employees should wear white leather oxfords or loafers. No sandals, houseshoes, moccasins, tennis shoes, or ballerina slippers will be worn. Shoes must be kept polished, and shoestrings are to be clean and white. Shoes should have nonslip soles.
4. Male employees may wear black, brown, or white leather shoes. Canvas shoes are not permitted.
5. Female employees should wear their hair neat, conservative, and off the shoulders. Conspicuous ribbons and ornate clips, pins, and barrettes are not to be worn in the hair. A hairnet is to be worn at all times while on duty. Hair is not to be in pin curls or hair rollers.
6. Male employees are to wear short, neat hair, or long hair tied back. A hairnet or baker's cap must be worn.
7. No jewelry is to be worn on duty other than a wedding band, engagement ring, and a watch. Small, nondangling earrings may be worn.
8. Fingernails are to be short, neat, and clean. Clear or colored nail polish is not to be worn.
9. Makeup should be conservative and in good taste.
10. Only white or light-colored underwear should be worn under the uniform. Bikini underpants are not allowed.
11. The uniform should be clean and neat at all times.
12. Natural-colored hose, free of runs, should cover entire leg. Anklets are not allowed.

POLICIES AND PROCEDURES
UNIT V

ANSWERS TO CLASS ASSIGNMENT SHEET

Evaluated to the satisfaction of the class instructor

POLICIES AND PROCEDURES
UNIT V

CLINICAL ASSIGNMENT SHEET #1 — LOCATE INFORMATION IN THE DIETARY POLICY AND PROCEDURE MANUAL

NAME ________________________________ SCORE ____________

The dietary policy and procedure manual provides much information. This assignment sheet will help you become familiar with the manual used in your facility.

PART I

Using the dietary policy and procedure manual in your facility, list the different sections included.

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CLINICAL ASSIGNMENT SHEET #1

PART II

Using the dietary policy and procedure manual in your facility, locate each of the following topics and write down the title of the section in which it is found.

A. Storage of food when it arrives in the facility from the vendor

B. System for identifying trays with special diet modification and patient name

C. Procedure to follow if a dietary employee has an infected burn on the hand

D. Correct dishwashing procedures

E. Temperature of food on the steam table at serving time

F. Temperature of food when it is delivered to the patient's room

G. How to handle an employee who is found using alcohol or drugs while on duty

H. Uniform and personal appearance policy and procedure

POLICIES AND PROCEDURES
UNIT V

CLINICAL ASSIGNMENT SHEET #2 — LIST THE TOPICS COVERED BY SANITATION AND SAFETY SECTION OF THE DIETARY POLICY AND PROCEDURE MANUAL

NAME ____ SCORE ________________

The section on sanitation and safety is an important part of the dietary policy and procedure manual. This assignment sheet will help you be aware of the information contained in that section.

Using the dietary policy and procedure manual in your facility, list the topics covered under the sanitation and safety section of the dietary policy and procedure manual.

____

____

____

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____

____

Do you feel any topics were omitted that should have been in the section studied?________

____

What would you add to the section?____

____

POLICIES AND PROCEDURES
UNIT V

CLINICAL ASSIGNMENT SHEET #3 — WRITE POLICIES AND PROCEDURES CORRECTLY

NAME ______________________________ SCORE ______________

In order to be effective in providing guidelines and information, policies and procedures must be thought out well and written well.

Write three policies and procedures on topics assigned by the clinical instructor. Follow the format that is used in the facility where you are employed.

Discuss the policies and procedures with the clinical instructor when you have completed the assignment. If they are written incorrectly, rewrite with the suggestions of the clinical instructor.

POLICIES AND PROCEDURES
UNIT V

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

POLICIES AND PROCEDURES
UNIT V

TEST

NAME ______________________________ SCORE ______________

1. Distinguish between a policy and a procedure. Write a "P" in the blank before policy and a "PR" in the blank before procedure.

_____a. Step-by-step description for doing something

_____b. Definite course of action selected to guide decisions

2. Select from the following list reasons for written policies and procedures. Write an "X" in the blank before each correct answer.

_____a. Serve as a central source for adding, changing, or deleting procedures

_____b. Eliminate need for planning

_____c. Avoid favoritism

_____d. Promote misunderstanding

_____e. Promote teamwork

_____f. Free supervisor from answering repetitive questions

_____g. Enforce the rules

_____h. Provide excellent information for training programs

_____i. Serve as documents for surveying agencies

3. Discuss problems associated with unwritten policies and procedures.

____

____

____

____

____

TEST

4. Select from the following list suggested sections in a dietary policy and procedure manual. Write an "X" in the blank before each correct answer.

_____a. Personnel policies

_____b. In-service education

_____c. Budget development

_____d. Medical staff meeting minutes

_____e. Disaster planning

_____f. Therapeutic menus

_____g. Patient food service

_____h. Food purchasing and storing

_____i. Food preparation

_____j. Sanitation and safety

_____k. Organization

_____l. Record keeping

_____m. Menu planning

5. Select from the following list possible policies and procedures for patient food service. Write an "X" in the blank before each correct answer.

_____a. Raw food cost

_____b. Temperature of food during serving

_____c. Food brought in by family or friends

_____d. Tray assembly

_____e. Number of dietary employees

_____f. Mealtimes

_____g. Patient diet instruction

_____h. Food purchasing

_____i. Substitutions if patient dislikes a menu item

TEST

______j. Patient visitation

______k. Temperature of food when patient receives it

______l. Type of tray service

6. State tips for writing a policy and procedure manual.

   a. Policies

      1) ____

      2) ____

      3) ____

   b. Procedures

      1) ____

      2) ____

      3) ____

      4) ____

7. Arrange in order steps in developing dietary policies and procedures. Write a "1" before the first step, a "2" before the second step, and so on.

______a. Dietitian and food service supervisor write final draft and have it approved by administrator

______b. Dietitian or dietary consultant and food service supervisor develop preliminary draft

______c. Policies and procedures are placed in a three-ring notebook

______d. Dietary department personnel have input

______e. Administrator reviews policy and procedure

(NOTE: Test questions 8 and 9 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

8. Locate information in the dietary policy and procedure manual.

9. Write policies and procedures correctly.

POLICIES AND PROCEDURES
UNIT V

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 234. The point total for questions 1-7 is 124; the point total for questions 8 and 9 is 110.)

1. (6 points)

    a. PR

    b. P

2. (18 points)

    a, c, e, f, h, i

3. (9 points)

    Discussion should include the following

    a. Lead to individual interpretation

    b. Change when personnel change

    c. Leave too much to memory

4. (26 points)

    a, b, c, e, f, g, h, i, j, k, l, m

5. (24 points)

    b, c, d, f, g, i, j, k, l

6. (21 points)

    a. Policies

        1) Include one policy per page and one subject per policy

        2) Write clear, concise statements

        3) Make sure that policies are practical and possible to achieve

ANSWERS TO TEST

b. Procedures
  1) Include all steps from beginning to end
  2) State purpose of the work
  3) State who is responsible for accomplishing procedure
  4) Use short sentences, and make concise statements

7. (20 points)
  a. 4
  b. 1
  c. 5
  d. 2
  e. 3

8. Evaluated to the satisfaction of the clinical instructor (35 points)

9. Evaluated to the satisfaction of the clinical instructor (75 points)

SUPERVISION OF COST CONTROL
UNIT VI

UNIT OBJECTIVE

After completing this unit, the student should be able to supervise factors involved in cost control and report information concerning cost control. This knowledge will be shown by completing assignment sheets and unit test with a minimum score of 85 percent.

SPECIFIC OBJECTIVES

After completing this unit, the student should be able to

1. Define *budget*.
2. State the supervisor's duties in establishing cost control in a dietary department.
3. Select from a list suggested items for a food service operating budget.
4. State cost factors in menu planning.
5. State guidelines for controlling nourishment costs.
6. State methods for controlling costs in purchasing, receiving, and storage.
7. State procedures for controlling food production costs.
8. State procedures for controlling labor costs.
9. Select from a list records for controlling costs.
10. State security measures for controlling costs.
11. List operating expenses.
12. Select from a list suggested energy conservation measures.
13. Calculate cost per meal.
14. Calculate the cost of nourishments for one week.
15. Weigh all meat items when received.
16. Analyze procedures for maintaining cost control in food storage areas.
17. Figure minutes of labor per meal.
18. Complete an inventory.

OBJECTIVE SHEET

19. Record food purchases, supplies, and equipment on a daily summary cost record.

20. Conduct an in-service class on energy conservation.

SUPERVISION OF COST CONTROL
UNIT VI

SUGGESTED ACTIVITIES

I. Suggested activities

  A. Make transparency.

  B. Provide students with objective sheet.

  C. Discuss unit and specific objectives.

  D. Provide students with information and assignment sheets.

  E. Dicuss information and assignment sheets.

  F. Develop appropriate learning activities for special needs students.

  G. Review "Cost Control in Food Production," Section C, Unit X, of *Food Production Worker.*

  H. Have students bring examples of energy conservation methods applied in the facilities where students are employed, and discuss those methods in class.

  I. Have students bring examples of inventory sheets used in the facilities where students are employed, and discuss those examples in class.

  J. Use Transparency Master #1 for doing a sample problem on how to figure raw food cost.

  K. Give test.

  L. Reteach if necessary.

II. Instructional materials

  A. Objective sheet

  B. Suggested activities

  C. Information sheet

  D. Transparency master: TM #1 — Meal Cost Record

  E. Class Assignment Sheet #1 — Calculate Cost per Meal

  F. Answers to class assignment sheet

SUGGESTED ACTIVITIES

G. Clinical assignment sheets

  1. Clinical Assignment Sheet #1 — Calculate the Cost of Nourishments for One Week
  2. Clinical Assignment Sheet #2 — Weigh All Meat Items When Received
  3. Clinical Assignment Sheet #3 — Analyze Procedures for Maintaining Cost Control in Food Storage Areas
  4. Clinical Assignment Sheet #4 — Figure Minutes of Labor per Meal
  5. Clinical Assignment Sheet #5 — Complete an Inventory
  6. Clinical Assignment Sheet #6 — Record Food Purchases, Supplies, and Equipment on a Daily Summary Cost Record
  7. Clinical Assignment Sheet #7 — Conduct an In-Service Class on Energy Conservation

H. Answers to clinical assignment sheets

I. Test

J. Answers to test

III. Unit references

A. Curtis, B. *Food Service Security: Internal Control, Chain Store Age Books.* New York: Lebhar-Friedman, Inc., 1975.

B. Knoll, A.P. *Food Service Management: A Human Relations Approach.* St. Louis, Missouri: McGraw-Hill Book Company, 1976.

C. Mahaffey, Mary J., et al. *Food Service Manual for Health Care Institutions.* Chicago, Illinois: American Hospital Association, 1981.

D. Stokes, J.F. *Cost Effective Quality Food Service.* Germantown, Maryland: Aspen Systems Corporation, 1979.

E. West, B.B., et al. *Food Service in Institutions*, 5th ed. New York: John Wiley and Sons, Inc., 1977.

SUPERVISION OF COST CONTROL
UNIT VI

INFORMATION SHEET

I. Budget — Financial plan for the future

II. Supervisor's duties in establishing cost control in a dietary department

   A. Plan budget with management

   B. Keep records that provide information for budget

   C. Periodically compare actual cost figures with budgeted figures

   D. Take corrective action when figures disagree

   EXAMPLE: Check authorized and unauthorized overtime.

III. Suggested items for a food service operating budget

   A. Raw food costs

   B. Labor costs

   C. Contracted services

   EXAMPLE: Dietary consultant

   D. Supply costs

   E. Equipment costs

   (NOTE: Equipment costs should include costs of replacement of major equipment such as range or refrigerator, or of minor equipment such as flatware, dishes, or pans.)

   F. Maintenance costs

IV. Cost factors in menu planning

   A. Type of menu

   EXAMPLE: Selective or nonselective

   (NOTE: Selective menus require more personnel to record food choices and more food preparation hours for the increased variety of foods to be prepared.)

INFORMATION SHEET

- B. Number and type of therapeutic diets

  (NOTE: Modified-diet menus should be coordinated with the regular menu to minimize extra food preparation.)

- C. Form of food purchased

  EXAMPLE: Convenience versus "from scratch"

V. Guidelines for controlling nourishment costs (Clinical Assignment Sheet #1)

- A. Use nourishment requisitions
- B. Record cost of nourishments
- C. Check to see whether nourishments are for patient or personnel use
- D. Check to see whether number of nourishments served increases on holidays and weekends
- E. Check amount of nourishments left in the refrigerator daily, and record

VI. Methods for controlling costs in purchasing, receiving, and storage

- A. Purchasing
  1. Obtain price quotes on merchandise ordered
  2. Obtain price comparisons from at least two vendors
  3. Use purchase orders
  4. Write specifications for all items to be purchased
- B. Receiving
  1. Check all merchandise with invoice
  2. Check all merchandise with purchase order
  3. Weigh all meat items (Clinical Assignment Sheet #2)
  4. Return all damaged merchandise
  5. Establish receiving hours

     EXAMPLE: Monday through Friday, 7:00 A.M. to 4:00 P.M.

INFORMATION SHEET

6. Check invoice price against quotation price

7. Keep records

   EXAMPLE: Keep invoices, purchase orders.

C. Storage

1. Store refrigerator and freezer items immediately

2. Use first-in, first-out (FIFO) system in storeroom (Clinical Assignment Sheet #3)

   (NOTE: First-in merchandise should be moved to the front of shelves and new merchandise should be moved to the back of shelves.)

3. Mark all cans with date and price

   (NOTE: Prices marked on cans and boxes help employees to be aware of cost. This practice may not be practical in all facilities, especially larger operations.)

4. Keep correct temperature in all food storage areas

VII. Procedures for controlling food production costs

A. Use production work sheets

B. Use standardized recipes

C. Use portion control

D. Use all leftovers daily

VIII. Procedures for controlling labor costs (Clinical Assignment Sheet #4)

A. Post work schedules for each job

B. Determine minutes of labor per meal

C. Examine rate of employee turnover and absenteeism

D. Analyze physical layout of kitchen and equipment

E. Provide good supervision

INFORMATION SHEET

IX. Records for controlling costs

  A. Cycle menus

  B. Nourishment records

  C. Purchase orders and invoices

  D. Meal census

  (NOTE: Meal census records should show regular and modified diets. Raw food costs for modified diets are usually higher than costs for regular diets.)

  E. Inventory records (Clinical Assignment Sheet #5)

  F. Daily summary of food purchases (Clinical Assignment Sheet #6)

  G. Daily summary of supplies and equipment purchases

  H. Monthly meal cost records (Transparency #1; Class Assignment Sheet #1)

  I. Monthly labor cost records

  J. Yearly summary of raw food and labor costs

X. Security measures for controlling costs

  A. Lock all storeroom areas when not in use

  EXAMPLE: Keep storeroom locked during in-service classes.

  B. Never allow food to be taken out of facility

  (NOTE: If employees are allowed to take home leftovers, employees might also take other food items.)

  C. Keep records of missing food items

  D. Screen prospective employees closely

XI. Operating expenses

  A. Utilities

  B. Repair of equipment

  C. Maintenance of equipment

INFORMATION SHEET

D. Laundry

E. Paper goods

F. Cleaning supplies

G. Office supplies

XII. Suggested energy conservation measures (Clinical Assignment Sheet #7)

A. Clean equipment regularly

(NOTE: Baked-on spills increase energy usage of stoves and grills. Refrigerator and freezer compressors use more energy when not cleaned regularly.)

B. Avoid leakage and waste of water

(NOTE: A leak of only sixty drops of water per minute yields a monthly water loss of 210 gallons.)

C. Turn off cooking and heating units when not in use

EXAMPLE: Establish a maximum time for preheating ovens.

D. Avoid use of aluminum foil in ovens or refrigerator shelving

(NOTE: Aluminum foil in ovens increases energy use and causes uneven baking.)

E. Check seals on ovens, refrigerators, and freezers to prevent energy loss

EXAMPLE: Close a piece of paper in the door. If seal is good, it should offer resistance when paper is pulled.

F. Place items in refrigerators and freezers in such a way that air can circulate

G. Establish training guidelines for energy conservation methods

FSS - 193-E

MEAL COST RECORD

Month ______________ 19 ____

INVENTORY

Beginning inventory	____________
Purchases	____________
Total	____________
Less: ending inventory	____________
Food consumed (raw food)	____________

CENSUS OF MEALS

Patient meals	____________
Employee meals	____________
Guest meals	____________
Total number of meals served this month	____________

RAW FOOD COST PER MEAL

Cost of food consumed divided by number of meals served during month	____________

TOTAL COST OF MEALS

Raw food cost	____________
Labor cost	____________
Total	____________
Less: cash from employee meals	____________
Total cost of meals served	____________

COST PER MEAL SERVED

Total cost of meals divided by number served ____________

DAILY COST PER PATIENT

Cost per meal served times three meals ____________

TM #1

SUPERVISION OF COST CONTROL
UNIT VI

CLASS ASSIGNMENT SHEET #1 — CALCULATE COST PER MEAL

NAME ______________________________ SCORE ______________

Each month, calculate raw food cost per meal served to compare with other similar food service operations and to compare month to month and yearly in your facility. Different methods can be used to arrive at this information. On the following page is one method. Complete the form with the figures provided by your class instructor.

PART I

Figure raw food cost per meal served.

A. Write in figures for inventory at the beginning of the month.

(NOTE: These figures will be the same as the ending inventory figures at the end of the previous month.)

B. Write in total amount of raw food purchases for the month.

C. Add beginning inventory and month's raw food purchases.

D. Write in figures for inventory at the end of the month. Subtract ending inventory from total inventory.

E. Determine total meals served during the month for patients, employees, and guests.

F. Divide the cost of food consumed by the number of meals served during the month to get the raw food cost per meal served.

196-E

CLASS ASSIGNMENT SHEET #1

MEAL COST RECORD

MONTH____________________19______

INVENTORY

Beginning inventory ____________

Purchases +____________

Total ____________

Less: ending inventory −____________

Cost of food consumed (raw food) ____________ ____________

CENSUS OF MEALS

Patient meals ____________

Employee meals ____________

Guest meals ____________

Total number of meals served this month ____________ ____________

RAW FOOD COST PER MEAL

Cost of food consumed divided by number of meals served during month ____________

CLASS ASSIGNMENT SHEET #1

PART II

Complete the form on the following page with the figures provided by your classroom instructor.

Figure total daily cost per patient. Follow directions A through F as outlined in Part I. After completing steps A through F, write in the raw food cost as listed in Part I of the form.

A. Add the dietary employees' payroll figure for the month to the cost of food consumed.

B. If money for employee meals or guest meals has been taken in during the month, it should be written in the blank "less cash from employee meals" and subtracted from the total of the raw food cost and labor cost.

C. The total of raw food, plus payroll, less cash from employee meals should then be divided by the total meal census for the month to arrive at the total cost per meal.

D. Multiply the total cost served times three to get the total daily cost per patient.

198-E

CLASS ASSIGNMENT SHEET #1

MEAL COST RECORD

MONTH____________________ 19______

INVENTORY

Beginning inventory __________

Purchases + __________

Total __________

Less: ending inventory – __________

Cost of food consumed (raw food) __________ __________

CENSUS OF MEALS

Patient meals __________

Employee meals __________

Guest meals __________

Total number of meals served this month __________ __________

RAW FOOD COST PER MEAL

Cost of food consumed divided by number of meals served during month __________

TOTAL COST OF MEALS

Raw food cost __________

Labor cost + __________

Total __________

Less: cash from employee meals – __________

Total cost of meals served __________ __________

COST PER MEAL SERVED

Total cost of meals divided by number served __________

DAILY COST PER PATIENT

Cost per meal served times three meals __________

SUPERVISION OF COST CONTROL
UNIT VI

ANSWERS TO CLASS ASSIGNMENT SHEET

Class Assignment Sheet #1 — Evaluated to the satisfaction of the class instructor

FSS - 201-E

SUPERVISION OF COST CONTROL
UNIT VI

CLINICAL ASSIGNMENT SHEET #1 — CALCULATE THE COST OF NOURISHMENTS FOR ONE WEEK

NAME ____________________________________ SCORE ______________

Cost of nourishments can be much more than expected when cost figures are not completed on the number of nourishments served. Record nourishment costs for one week, using current prices on invoices. Discuss your findings with the clinical instructor.

Nourishment	**Cost**	**Number of Items Served in One Week**	**Cost for Week**	**Cumulative Total**
EXAMPLES:				
Milkshake	$0.40	100	$40.00	$40.00
Eggnog	0.35	50	17.50	57.50

202-E

CLINICAL ASSIGNMENT SHEET #1

Nourishment	Cost	Number of Items Served in One Week	Cost for Week	Cumulative Total

FSS - 203-E

SUPERVISION OF COST CONTROL
UNIT VI

CLINICAL ASSIGNMENT SHEET #2 — WEIGH ALL MEAT ITEMS WHEN RECEIVED

NAME ______________________________ SCORE ______________

One step in controlling costs is to establish effective receiving procedures, including weighing or counting all items received to avoid paying for items that were not delivered. Because meat is one of the most expensive categories of food you purchase, it is important that you compare the weight of the meat actually delivered to the weight indicated on the invoice.

Record weight on all meat items coming into the dietary department for one week. Note any differences you found between the invoice weight and the actual weight of the meat.

Date	Meat Item	Invoice Weight	Actual Weight	Difference
EXAMPLE: 1/10	Ground beef	50 lb	48 lb	–2 lb

SUPERVISION OF COST CONTROL
UNIT VI

CLINICAL ASSIGNMENT SHEET #3 — ANALYZE PROCEDURES FOR MAINTAINING COST CONTROL IN FOOD STORAGE AREAS

NAME ______________________________ SCORE ______________

Proper storage procedures are an important factor in cost control. Analyze the cost control procedures for storage areas in your facility by answering the following questions.

A. Dry storage areas

1. Describe the procedure for rotating stock.

   EXAMPLE: First-in, first-out (FIFO) system

2. How is the cost of food in the storeroom recorded?

   EXAMPLE: Cost is marked on containers before they are placed in storage.

B. Refrigerated storage areas

1. Describe the procedure for rotating stock.

CLINICAL ASSIGNMENT SHEET #3

2. How is the cost of food in refrigerated areas recorded?

SUPERVISION OF COST CONTROL
UNIT VI

CLINICAL ASSIGNMENT SHEET #4 — FIGURE MINUTES OF LABOR PER MEAL

NAME ______________________________ SCORE ______________

Labor cost is an important factor to consider in controlling dietary department costs.

PART I

Figuring minutes per meal is one way to evaluate whether the number of employees in the dietary department is appropriate for the workload. Do not include the food service supervisor's time.

EXAMPLE:

Step 1. Number of hours per day of dietary employees

5 employees × 8 hours = 40 hours
1 employee × 6 hours = 6 hours
3 employees × 4 hours = 12 hours
58 hours

Step 2. Convert hours to minutes by multiplying answer in step 1 × 60

58 × 60 = 3,480 minutes

Step 3. Number of meals served per day including patients, employees, and guests — 375

Step 4. Figure minutes of labor per meal by dividing the minutes of labor required per day (step 2) by the number of meals served (step 3)

3,480 ÷ 375 = 9.28 minutes per meal

Using the above formula, figure the minutes per meal of labor for the dietary department in the facility where you are employed. Complete the following information.

A. Number of hours of labor per day of dietary employees

____

B. Convert hours to minutes by multiplying answer in step 1 × 60

____

C. Number of meals served per day including patients, employees, and guests

(NOTE: This number should be obtained from meal census records.)

____

CLINICAL ASSIGNMENT SHEET #4

D. Figure minutes of labor per meal by dividing the minutes of labor required per day (step 2) by the number of meals served (step 3)

Part II

Compare your results with other facilities. How do your answers compare?

SUPERVISION OF COST CONTROL
UNIT VI

CLINICAL ASSIGNMENT SHEET #5 — COMPLETE AN INVENTORY

NAME ______________________________ SCORE ______________

Maintaining an accurate inventory is critical to controlling food costs. Complete the following assignment in order to become familiar with the inventory procedures in your facility.

PART I

A. What type of inventory is used in your facility?

____

____

B. Who is responsible for maintaining the inventory?

____

____

C. How does the inventory contribute to the overall cost control program in your facility?

____

____

PART II

A. Complete a physical inventory using the method in effect at the facility where you are employed.

(NOTE: The clinical instructor may need to adjust this assignment to fit a perpetual rather than a physical inventory.)

B. Describe the assignment you have completed, and include your comments and/or suggestions for improvements in the procedure.

____

____

____

____

SUPERVISION OF COST CONTROL
UNIT VI

CLINICAL ASSIGNMENT SHEET #6 — RECORD FOOD PURCHASES, SUPPLIES, AND EQUIPMENT ON A DAILY SUMMARY COST RECORD

NAME ______________________________ SCORE ______________

One important aspect of controlling costs is to keep a running total of each category of goods purchased and be able to know, at any given time, when corrective steps should be taken to avoid going "over budget." The following assignment is designed to demonstrate one method of record keeping to assist the food service supervisor with this responsibility.

Record purchases of food, supplies, and equipment for one week on a daily summary cost record. Complete the form on the following page, or use the method currently in use in your facility as assigned by the clinical instructor.

EXAMPLE:

DAILY SUMMARY COST RECORD

Month________________, 19_____

Date	Food	Cumulative Total	Supplies	Cumulative Total	Equipment	Cumulative Total
1	$650.10	$ 650.10	$75.20	$ —	$ —	$ —
2	925.16	1,575.26	—	75.20	32.50	32.50
3	315.29	1,890.55	23.36	98.56	—	32.50

CLINICAL ASSIGNMENT SHEET #6

DAILY SUMMARY COST RECORD

Month____________________, 19______

Date	Food	Cumulative Total	Supplies	Cumulative Total	Equipment	Cumulative Total

SUPERVISION OF COST CONTROL
UNIT VI

CLINICAL ASSIGNMENT SHEET #7 — CONDUCT AN IN-SERVICE CLASS ON ENERGY CONSERVATION

NAME ____ SCORE ________________

Reducing energy costs has become increasingly more important in controlling operating costs in the dietary department. Many of the methods for reducing energy costs depend on employee training and cooperation.

(NOTE: You may find it helpful to review the information in Section D, Unit IV, "Equipment Management.")

Conduct an in-service class on energy conservation for the dietary department employees.

PART I

Write your lesson plan in the space provided.

CLINICAL ASSIGNMENT SHEET #7

PART II

Using the outline you developed, conduct an in-service class for employees as assigned by your clinical instructor.

PART III

Develop and use follow-up activities to evaluate the effectiveness of your training.

EXAMPLE: You may want to use the checklist you completed in Clinical Assignment Sheet #3, Section D, Unit IV, "Equipment Management." Repeat your survey after the in-service to determine if any improvements have been made.

SUPERVISION OF COST CONTROL
UNIT VI

ANSWERS TO CLINICAL ASSIGNMENT SHEETS

Clinical Assignment Sheet #1 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #2 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #3 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #4 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #5 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #6 — Evaluated to the satisfaction of the clinical instructor

Clinical Assignment Sheet #7 — Evaluated to the satisfaction of the clinical instructor

SUPERVISION OF COST CONTROL
UNIT VI

TEST

NAME ______________________________ SCORE ______________

1. Define *budget*.

   ____

2. State the supervisor's duties in establishing cost control in a dietary department.

   a. ____

   b. ____

   c. ____

   d. ____

3. Select from the following list suggested items for a food service operating budget. Write an "X" in the blank before each correct answer.

   _____a. Equipment costs

   _____b. Medical supplies

   _____c. Raw food costs

   _____d. Maintenance costs

   _____e. Supply costs

   _____f. Labor costs

   _____g. Transportation costs

   _____h. Contracted services

   _____i. Cost of leftovers

4. State cost factors in menu planning.

   a. ____

   b. ____

   c. ____

TEST

5. State guidelines for controlling nourishment costs.

a. ____________________

b. ____________________

c. ____________________

d. ____________________

e. ____________________

6. State three methods per category for controlling costs in purchasing, receiving, and storage.

a. Purchasing

1) ____________________

2) ____________________

3) ____________________

b. Receiving

1) ____________________

2) ____________________

3) ____________________

c. Storage

1) ____________________

2) ____________________

3) ____________________

7. State procedures for controlling food production costs.

a. ____________________

b. ____________________

c. ____________________

d. ____________________

TEST

8. State procedures for controlling labor costs.

a. ____

b. ____

c. ____

d. ____

e. ____

9. Select from the following list records for controlling costs. Write an "X" in the blank before each correct answer.

______a. Yearly summary of raw food and labor costs

______b. Meal census

______c. Cycle menus

______d. Equipment maintenance records

______e. Nourishment records

______f. Employee performance evaluations

______g. Purchase orders and invoices

______h. Monthly labor cost records

______i. Inventory records

______j. Monthly meal cost records

______k. Daily summary of food purchases

______l. Daily summary of supplies and equipment purchases

______m. Consultant dietitian's reports

TEST

10. State security measures for controlling costs.

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

11. List five operating expenses.

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

e. ______________________________

12. Select from the following list suggested energy conservation measures. Write an "X" in the blank before each correct answer.

______a. Place items in refrigerators and freezers in such a way that air can circulate

______b. Preheat oven for one hour

______c. Avoid leakage and waste of water

______d. Use exhaust fans as little as possible

______e. Clean equipment regularly

______f. Turn off cooking and heating units when not in use

______g. Use smaller light bulbs in light fixtures

______h. Avoid use of aluminum foil in ovens or refrigerator shelving

______i. Establish training guidelines for energy conservation methods

______j. Check seals on ovens, refrigerators, and freezers to prevent energy loss

TEST

(NOTE: Test questions 13-20 list the assignment sheets. They are an important part of this test. If they have not been completed, check with your instructor.)

13. Calculate cost per meal.

14. Calculate the cost of nourishments for one week.

15. Weigh all meat items when received.

16. Analyze procedures for maintaining cost control in food storage areas.

17. Figure minutes of labor per meal.

18. Complete an inventory.

19. Record food purchases, supplies, and equipment on a daily summary cost record.

20. Conduct an in-service class on energy conservation.

SUPERVISION OF COST CONTROL
UNIT VI

ANSWERS TO TEST

(NOTE: It may be helpful to use your blank test to make a test key. The points designated in parentheses are intended to be guidelines and should be adapted to meet the needs of each teaching/learning situation. The point total for the entire test is 639. The point total for questions 1-12 is 204; the point total for questions 13-20 is 435.)

1. (2 points)

   Financial plan for the future

2. (20 points)

   a. Plan budget with management

   b. Keep records that provide information for budget

   c. Periodically compare actual cost figures with budgeted figures

   d. Take corrective action when figures disagree

3. (18 points)

   a, c, d, e, f, h

4. (15 points)

   a. Type of menu

   b. Number and type of therapeutic diets

   c. Form of food purchased

5. (15 points)

   a. Use nourishment requisitions

   b. Record cost of nourishments

   c. Check to see whether nourishments are for patient or personnel use

   d. Check to see whether number of nourishments served increases on holidays and weekends

   e. Check amount of nourishments left in the refrigerator daily, and record

ANSWERS TO TEST

6. (27 points)

   Answer should include any three from each of the following categories

   a. Purchasing
      1) Obtain price quotes on merchandise ordered
      2) Obtain price comparisons from at least two vendors
      3) Use purchase orders
      4) Write specifications for all items to be purchased

   b. Receiving
      1) Check all merchandise with invoice
      2) Check all merchandise with purchase order
      3) Weigh all meat items
      4) Return all damaged merchandise
      5) Establish receiving hours
      6) Check invoice price against quotation price
      7) Keep records

   c. Storage
      1) Store refrigerator and freezer items immediately
      2) Use first-in, first-out (FIFO) system in storeroom
      3) Mark all cans with date and price
      4) Keep correct temperature in all food storage areas

7. (16 points)

   a. Use production work sheets
   b. Use standardized recipes
   c. Use portion control
   d. Use all leftovers daily

ANSWERS TO TEST

8. (20 points)

   a. Post work schedules for each job

   b. Determine minutes of labor per meal

   c. Examine rate of employee turnover and absenteeism

   d. Analyze physical layout of kitchen and equipment

   e. Provide good supervision

9. (26 points)

   a, b, c, e, g, h, i, j, k, l

10. (20 points)

   a. Lock all storeroom areas when not in use

   b. Never allow food to be taken out of facility

   c. Keep records of missing food items

   d. Screen prospective employees closely

11. (5 points)

   Answer should include any five of the following

   a. Utilities

   b. Repair of equipment

   c. Maintenance of equipment

   d. Laundry

   e. Paper goods

   f. Cleaning supplies

   g. Office supplies

12. (20 points)

   a, c, e, f, h, i, j

ANSWERS TO TEST

13. Evaluated to the satisfaction of the class instructor (50 points)

14. Evaluated to the satisfaction of the clinical instructor (75 points)

15. Evaluated to the satisfaction of the clinical instructor (50 points)

16. Evaluated to the satisfaction of the clinical instructor (25 points)

17. Evaluated to the satisfaction of the clinical instructor (35 points)

18. Evaluated to the satisfaction of the clinical instructor (50 points)

19. Evaluated to the satisfaction of the clinical instructor (50 points)

20. Evaluated to the satisfaction of the clinical instructor (100 points)